

• *Column B (Allowed Charges):* The aggregate estimated PFS allowed charges for the specialty based on CY 2012 utilization and CY 2013 rates. That is, allowed charges are the PFS amounts for covered services and include coinsurance and deductibles (which are the financial responsibility of the beneficiary). These amounts have been summed across all services furnished by

physicians, practitioners, and suppliers within a specialty to arrive at the total allowed charges for the specialty.

• *Column C (Impact of Work and Malpractice (MP) RVU Changes):* This column shows the estimated CY 2014 impact on total allowed charges of the changes in the work and malpractice RVUs, including the impact of changes due to potentially misvalued codes.

• *Column D (Impact of PE RVU Changes):* This column shows the estimated CY 2014 impact on total allowed charges of the changes in the PE RVUs.

• *Column E (Combined Impact):* This column shows the estimated CY 2014 combined impact on total allowed charges of all the changes in the previous columns.

TABLE 71—CY 2014 PFS PROPOSED RULE ESTIMATED IMPACT ON TOTAL ALLOWED CHARGES BY SPECIALTY *

Specialty	Allowed charges (mil)	Impact of work and MP RVU changes (percent)	Impact of PE RVU changes (percent)	Combined impact (percent)
(A)	(B)	(C)	(D)	(E)
TOTAL	\$86,995	2	-2	0
01—ALLERGY/IMMUNOLOGY	213	1	-4	-3
02—ANESTHESIOLOGY	1,862	4	-1	3
03—CARDIAC SURGERY	355	3	-1	2
04—CARDIOLOGY	6,425	2	0	2
05—COLON AND RECTAL SURGERY	158	2	-2	0
06—CRITICAL CARE	273	3	-1	2
07—DERMATOLOGY	3,113	2	-4	-2
08—EMERGENCY MEDICINE	2,929	3	0	3
09—ENDOCRINOLOGY	447	2	-2	0
10—FAMILY PRACTICE	6,358	2	-1	1
11—GASTROENTEROLOGY	1,901	3	-2	1
12—GENERAL PRACTICE	528	2	-2	0
13—GENERAL SURGERY	2,236	3	-2	1
14—GERIATRICS	231	3	-1	2
15—HAND SURGERY	151	2	-2	0
16—HEMATOLOGY/ONCOLOGY	1,890	2	-3	-1
17—INFECTIOUS DISEASE	635	3	-1	2
18—INTERNAL MEDICINE	11,416	3	-2	1
19—INTERVENTIONAL PAIN MGMT	640	2	-3	-1
20—INTERVENTIONAL RADIOLOGY	219	2	-6	-4
21—MULTISPECIALTY CLINIC/OTHER PHY	79	2	-2	0
22—NEPHROLOGY	2,123	3	-2	1
23—NEUROLOGY	1,498	2	-4	-2
24—NEUROSURGERY	712	2	-1	1
25—NUCLEAR MEDICINE	51	2	-1	1
27—OBSTETRICS/GYNECOLOGY	688	2	-2	0
28—OPHTHALMOLOGY	5,592	2	-2	0
29—ORTHOPEDIC SURGERY	3,683	2	-2	0
30—OTOLARYNGOLOGY	1,128	2	-4	-2
31—PATHOLOGY	1,134	3	-8	-5
32—PEDIATRICS	63	3	-3	0
33—PHYSICAL MEDICINE	999	3	-3	0
34—PLASTIC SURGERY	367	2	-2	0
35—PSYCHIATRY	1,165	3	-1	2
36—PULMONARY DISEASE	1,775	3	-2	1
37—RADIATION ONCOLOGY	1,783	1	-6	-5
38—RADIOLOGY	4,635	2	-3	-1
39—RHEUMATOLOGY	551	2	-5	-3
40—THORACIC SURGERY	332	3	-1	2
41—UROLOGY	1,858	2	-4	-2
42—VASCULAR SURGERY	925	2	-4	-2
43—AUDIOLOGIST	56	2	-1	1
44—CHIROPRACTOR	722	3	-1	2
45—CLINICAL PSYCHOLOGIST	579	4	-1	3
46—CLINICAL SOCIAL WORKER	408	4	-1	3
47—DIAGNOSTIC TESTING FACILITY	779	0	-7	-7
48—INDEPENDENT LABORATORY **	812	1	-27	-26
49—NURSE ANES/ANES ASST	1,055	4	0	4
50—NURSE PRACTITIONER	1,937	3	-2	1
51—OPTOMETRY	1,106	2	-2	0
52—ORAL/MAXILLOFACIAL SURGERY	44	2	-4	-2
53—PHYSICAL/OCCUPATIONAL THERAPY	2,797	2	-1	1
54—PHYSICIAN ASSISTANT	1,405	3	-2	1
55—PODIATRY	1,975	2	-2	0
56—PORTABLE X-RAY SUPPLIER	110	1	-2	-1

TABLE 71—CY 2014 PFS PROPOSED RULE ESTIMATED IMPACT ON TOTAL ALLOWED CHARGES BY SPECIALTY*—
Continued

Specialty	Allowed charges (mil)	Impact of work and MP RVU changes (percent)	Impact of PE RVU changes (percent)	Combined impact (percent)
(A)	(B)	(C)	(D)	(E)
57—RADIATION THERAPY CENTERS	62	0	-13	-13
98—OTHER	25	3	-2	1

* Table 71 shows only the payment impact on PFS services. These impacts use a constant conversion factor and thus do not include the effects of the January 2014 conversion factor change required under current law.

** PFS Payments only, which account for ~17% of Independent Laboratory payments from Medicare.

Table 72 shows the estimated impact of selected policy proposals on total allowed charges, by specialty. The following is an explanation of the information represented in Table 72:

- *Column A (Specialty):* The Medicare specialty code as reflected in our physician/supplier enrollment files.
- *Column B (Allowed Charges):* The aggregate estimated PFS allowed charges for the specialty based on CY 2012 utilization and CY 2013 rates. That is, allowed charges are the PFS amounts for covered services and include coinsurance and deductibles (which are the financial responsibility of the beneficiary). These amounts have been summed across all services furnished by physicians, practitioners, and suppliers

within a specialty to arrive at the total allowed charges for the specialty.

- *Column C (Impact of 2012 Claims data, 90 Percent Equipment Utilization Assumption, Ultrasound Changes, and Other Minor Changes):* This column shows the estimated CY 2014 impact on total allowed charges of the changes in the RVUs due to the 90 percent equipment utilization assumption discussed in section II.A.2.f. of this proposed rule, ultrasound changes discussed in section II.A.5, the use of CY 2012 claims data to model payment rates, and all other proposals that result in minimal redistribution of payments under the PFS.

- *Column D (Impact of OPDS/ASC cap):* This column shows the estimated

CY 2014 impact on total allowed charges of the changes in the RVUs resulting from our proposed policy discussed in section II.A.4. of this proposed rule.

- *Column E (Impact of MEI Revision):* This column shows the estimated CY 2014 combined impact on total allowed charges of the changes in the RVUs resulting from our proposed policy to adjust the RVUs to match the proposed revised MEI weights.

- *Column F (Cumulative Impact):* This column shows the estimated CY 2014 combined impact on total allowed charges of all the proposed changes in the previous columns.

TABLE 72—CY 2014 PFS PROPOSED RULE ESTIMATED IMPACT ON TOTAL ALLOWED CHARGES BY SPECIALTY BY
SELECTED PROPOSAL*

Specialty	Allowed charges (mil)	Impact of 2012 claims data, 90% utilization assumption, ultrasound changes, and other minor changes (percent)	Impact of OPD/ASC cap (percent)	Impact of MEI revision (percent)	Total (cumulative) impact (percent)
(A)	(B)	(C)	(D)	(E)	(F)
TOTAL	\$86,995	0%	0%	0%	0%
01—ALLERGY/IMMUNOLOGY	213	-1	0	-2	-3
02—ANESTHESIOLOGY	1,862	0	0	3	3
03—CARDIAC SURGERY	355	0	0	2	2
04—CARDIOLOGY	6,425	2	0	0	2
05—COLON AND RECTAL SURGERY	158	0	0	0	0
06—CRITICAL CARE	273	0	0	2	2
07—DERMATOLOGY	3,113	0	0	-2	-2
08—EMERGENCY MEDICINE	2,929	0	0	3	3
09—ENDOCRINOLOGY	447	-1	1	0	0
10—FAMILY PRACTICE	6,358	0	1	0	1
11—GASTROENTEROLOGY	1,901	0	0	1	1
12—GENERAL PRACTICE	528	0	0	0	0
13—GENERAL SURGERY	2,236	0	0	1	1
14—GERIATRICS	231	0	1	1	2
15—HAND SURGERY	151	-1	1	0	0
16—HEMATOLOGY/ONCOLOGY	1,890	-1	1	-1	-1
17—INFECTIOUS DISEASE	635	0	0	2	2
18—INTERNAL MEDICINE	11,416	0	1	0	1
19—INTERVENTIONAL PAIN MGMT	640	-1	0	0	-1
20—INTERVENTIONAL RADIOLOGY	219	-1	-2	-1	-4
21—MULTISPECIALTY CLINIC/OTHER PHY	79	-1	0	1	0