

Appendix K  
Estimated Impact of an  
Annual Per-Beneficiary Outpatient  
Physical Therapy/Speech-Language  
Pathology Combined Cap for CY 2002

## Key to Appendix K:

The tables in Appendix K provide an estimate of the number and percent of beneficiaries that might have been impacted by the outpatient therapy limitation in CY 2002 had it been applied to physical therapy (PT) and speech-language pathology (SLP) services as a combined cap.

Adjusting the \$1500 statutory cap per the Medicare Economic Index (MEI), the CY 2002 annual per-beneficiary limitation would have been \$1540 for incurred expenses (allowed amount)<sup>1</sup>. The Medicare paid amount represents the limitation after applicable deductible and coinsurance (20 percent) is applied. We estimate that in CY 2002, the average payment threshold before the cap limits were surpassed was \$1232<sup>2</sup>.

**The first column** in each table represents the demographic groups represented (e.g. age, gender, state of residence, principal claim diagnosis)<sup>3</sup>.

**The “Beneficiaries receiving PT/SLP services” column** represents the total number of beneficiaries within each subgroup that received outpatient PT and/or SLP services in CY 2002.

**The “Beneficiaries surpassing SLP cap threshold” column** identifies the estimated number of beneficiaries that surpassed the PT/SLP combined financial limitation threshold in CY 2002.

**The “Percent of beneficiaries surpassing PT/SLP cap threshold” column** represents the estimated percentage of beneficiaries within all outpatient physical therapy and speech-language pathology patients in each subgroup that would have surpassed the financial limitations in CY 2002.

**The “Average paid above PT/SLP cap threshold” column** represents the estimated average Medicare payment above the PT/SLP combined cap threshold for all beneficiaries listed in the “Beneficiaries surpassing PT/SLP cap threshold” column. For example, If Medicare paid \$2332, the payment above the cap threshold would be \$1000 (\$2332 paid - \$1232 cap threshold = \$1000).

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<sup>1</sup> Medicare Claims Processing Manual (Pub. 104), Ch. 5, Section 10.2 *The Financial Limitation*.

<sup>2</sup> Preliminary data analysis revealed that the average Medicare payment amount for outpatient therapy services was about 78-79 percent of the allowed fee schedule prices indicating that the deductible has negligible impact across all beneficiaries that received outpatient therapy services. This may be in part due to the referral requirement for outpatient therapy services. In most situations, the beneficiary's deductible is probably applied against the referring physician claim or other Part B claim that occurred earlier during the calendar year. The \$1232 threshold estimate is based upon the 20 percent coinsurance only (\$1540 \* 80% = \$1232).

<sup>3</sup> Although beneficiaries may experience multiple episodes of one condition, or of separate conditions during a calendar year, this analysis classifies a beneficiary's diagnosis for the entire year based only upon the principal claim diagnosis first reported during the year for that therapy type.

**The “Total paid above PT/SLP cap” threshold column** represents the estimated total Medicare expenditures above a PT/SLP combined cap threshold in CY 2002 (‘Total paid above PT/SLP cap’ = “Beneficiaries surpassing PT/SLP cap threshold” \* “Average paid above PT/SLP cap threshold”).

**The “Beneficiaries that did not or could not access hospital outpatient PT/SLP” columns** represents the estimated likelihood of beneficiaries surpassing the cap threshold limits when they are unable to, or choose not to receive outpatient PT and or SLP services from an outpatient hospital provider.

**Appendix K-Table 1 Physical Therapy/Speech-Language Pathology Combined Cap Impact by Beneficiary Age**

Age group	Beneficiaries receiving PT/SLP services	Beneficiaries surpassing PT/SLP cap threshold	Percent of beneficiaries surpassing PT/SLP cap threshold	Average paid above PT/SLP cap threshold	Total paid above PT/SLP cap threshold	Beneficiaries that did not or could not access hospital outpatient PT/PT/SLP	
						Beneficiaries surpassing PT/SLP cap threshold	Percent of beneficiaries surpassing PT/SLP cap threshold
<b>Total</b>	<b>3,503,136</b>	<b>508,686</b>	<b>14.5%</b>	<b>\$1,263</b>	<b>\$642,383,941</b>	<b>469,850</b>	<b>92.4%</b>
<65	450,099	48,182	10.7%	\$1,397	\$67,297,727	44,014	91.4%
65-69	613,068	76,700	12.5%	\$1,161	\$89,080,147	70,758	92.3%
70-74	679,338	91,077	13.4%	\$1,211	\$110,259,638	83,600	91.8%
75-79	674,409	97,120	14.4%	\$1,257	\$122,106,062	89,270	91.9%
80-84	534,769	86,050	16.1%	\$1,294	\$111,382,260	79,484	92.4%
85-89	338,465	64,640	19.1%	\$1,320	\$85,351,302	60,362	93.4%
90+	212,988	44,917	21.1%	\$1,267	\$56,905,347	42,362	94.3%

**Appendix K-Table 2 Physical Therapy/Speech-Language Pathology Combined Cap Impact by Beneficiary Gender**

Gender group	Beneficiaries receiving PT/SLP services	Beneficiaries surpassing PT/SLP cap threshold	Percent of beneficiaries surpassing PT/SLP cap threshold	Average paid above PT/SLP cap threshold	Total paid above PT/SLP cap threshold	Beneficiaries that did not or could not access hospital outpatient PT/SLP	
						Beneficiaries surpassing PT/SLP cap threshold	Percent of beneficiaries surpassing PT/SLP cap threshold
<b>Total</b>	<b>3,503,136</b>	<b>508,686</b>	<b>14.5%</b>	<b>\$1,263</b>	<b>\$642,383,941</b>	<b>469,850</b>	<b>92.4%</b>
Female	2,314,385	342,293	14.8%	\$1,241	\$424,939,645	317,328	92.7%
Male	1,188,747	166,392	14.0%	\$1,307	\$217,439,402	152,521	91.7%

**Appendix K-Table 3 Physical Therapy/Speech-Language Pathology Combined Cap Impact by Beneficiary State**

State group	Beneficiaries receiving PT/SLP services	Beneficiaries surpassing PT/SLP cap threshold	Percent of beneficiaries surpassing PT/SLP cap threshold	Average paid above PT/SLP cap threshold	Total paid above PT/SLP cap threshold	Beneficiaries that did not or could not access hospital outpatient PT/SLP	
						Beneficiaries surpassing PT/SLP cap threshold	Percent of beneficiaries surpassing PT/SLP cap threshold
<b>Total</b>	<b>3,503,136</b>	<b>508,686</b>	<b>14.5%</b>	<b>\$1,263</b>	<b>\$642,383,941</b>	<b>469,850</b>	<b>92.4%</b>
AK - Alaska	4,191	525	12.5%	\$1,432	\$751,921	471	89.7%
AL - Alabama	52,216	5,574	10.7%	\$1,227	\$6,836,790	5,104	91.6%
AR - Arkansas	33,207	3,290	9.9%	\$1,150	\$3,783,368	2,977	90.5%
AZ - Arizona	47,390	6,158	13.0%	\$1,059	\$6,520,275	5,643	91.6%
CA - California	283,471	58,457	20.6%	\$1,564	\$91,439,024	54,474	93.2%
CO - Colorado	39,472	4,811	12.2%	\$1,239	\$5,962,080	4,358	90.6%
CT - Connecticut	58,219	9,579	16.5%	\$1,023	\$9,801,329	9,020	94.2%
DC - District of Columbia	6,203	923	14.9%	\$1,408	\$1,299,667	829	89.8%
DE - Delaware	12,519	2,502	20.0%	\$983	\$2,459,366	2,386	95.4%
FL - Florida	306,087	63,935	20.9%	\$1,280	\$81,809,947	59,485	93.0%
GA - Georgia	75,639	7,727	10.2%	\$1,233	\$9,526,232	7,070	91.5%
HI - Hawaii	7,921	1,278	16.1%	\$1,155	\$1,476,205	1,172	91.7%
IA - Iowa	53,423	2,546	4.8%	\$928	\$2,362,077	2,256	88.6%
ID - Idaho	17,784	2,159	12.1%	\$1,105	\$2,386,710	1,971	91.3%
IL - Illinois	150,061	17,540	11.7%	\$1,176	\$20,631,250	15,836	90.3%
IN - Indiana	87,738	10,768	12.3%	\$1,288	\$13,864,338	9,860	91.6%
KS - Kansas	38,218	3,143	8.2%	\$1,077	\$3,386,551	2,797	89.0%
KY - Kentucky	51,261	6,180	12.1%	\$1,277	\$7,892,107	5,657	91.5%
LA - Louisiana	47,829	9,583	20.0%	\$1,485	\$14,233,342	8,838	92.2%
MA - Massachusetts	77,224	8,622	11.2%	\$1,188	\$10,242,074	7,830	90.8%
MD - Maryland	65,963	12,938	19.6%	\$1,066	\$13,788,285	12,303	95.1%
ME - Maine	21,299	1,184	5.6%	\$961	\$1,137,871	1,049	88.6%
MI - Michigan	145,701	22,336	15.3%	\$1,264	\$28,237,841	20,669	92.5%

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State group	Beneficiaries receiving PT/SLP services	Beneficiaries surpassing PT/SLP cap threshold	Percent of beneficiaries surpassing PT/SLP cap threshold	Average paid above PT/SLP cap threshold	Total paid above PT/SLP cap threshold	Beneficiaries that did not or could not access hospital outpatient PT/SLP	
						Beneficiaries surpassing PT/SLP cap threshold	Percent of beneficiaries surpassing PT/SLP cap threshold
MN - Minnesota	65,156	3,343	5.1%	\$881	\$2,944,581	2,984	89.3%
MO - Missouri	72,489	9,487	13.1%	\$1,320	\$12,518,286	8,684	91.5%
MS - Mississippi	37,090	6,136	16.5%	\$2,213	\$13,579,029	5,626	91.7%
MT - Montana	14,680	1,068	7.3%	\$989	\$1,055,910	963	90.2%
NC - North Carolina	96,159	13,545	14.1%	\$1,438	\$19,477,981	12,445	91.9%
ND - North Dakota	10,206	292	2.9%	\$902	\$263,483	243	83.2%
NE - Nebraska	25,447	2,220	8.7%	\$935	\$2,076,011	1,945	87.6%
NH - New Hampshire	20,450	1,661	8.1%	\$987	\$1,639,473	1,456	87.7%
NJ - New Jersey	107,135	21,138	19.7%	\$1,230	\$26,007,350	19,711	93.2%
NM - New Mexico	18,090	2,148	11.9%	\$1,059	\$2,274,775	1,974	91.9%
NV - Nevada	15,373	2,787	18.1%	\$1,278	\$3,560,448	2,622	94.1%
NY - New York	257,703	49,554	19.2%	\$1,237	\$61,292,847	45,825	92.5%
OH - Ohio	161,389	20,883	12.9%	\$1,163	\$24,286,303	19,308	92.5%
OK - Oklahoma	36,434	5,077	13.9%	\$1,443	\$7,326,720	4,832	95.2%
OR - Oregon	34,352	2,312	6.7%	\$845	\$1,952,854	2,102	90.9%
PA - Pennsylvania	174,447	26,842	15.4%	\$1,152	\$30,920,373	24,701	92.0%
PR - Puerto Rico	28,499	1,358	4.8%	\$657	\$892,342	1,328	97.8%
RI - Rhode Island	11,782	1,325	11.2%	\$1,037	\$1,374,330	1,183	89.3%
SC - South Carolina	48,165	6,362	13.2%	\$1,261	\$8,020,255	5,910	92.9%
SD - South Dakota	11,297	580	5.1%	\$948	\$549,997	517	89.1%
TN - Tennessee	67,345	8,717	12.9%	\$1,320	\$11,508,794	8,081	92.7%
TX - Texas	198,137	26,600	13.4%	\$1,214	\$32,304,370	24,759	93.1%
UT - Utah	21,807	2,804	12.9%	\$997	\$2,795,336	2,617	93.3%
VA - Virginia	85,402	12,845	15.0%	\$1,215	\$15,607,317	11,917	92.8%
VT - Vermont	10,722	875	8.2%	\$954	\$834,706	748	85.5%

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State group	Beneficiaries receiving PT/SLP services	Beneficiaries surpassing PT/SLP cap threshold	Percent of beneficiaries surpassing PT/SLP cap threshold	Average paid above PT/SLP cap threshold	Total paid above PT/SLP cap threshold	Beneficiaries that did not or could not access hospital outpatient PT/SLP	
						Beneficiaries surpassing PT/SLP cap threshold	Percent of beneficiaries surpassing PT/SLP cap threshold
WA - Washington	68,595	7,268	10.6%	\$955	\$6,942,103	6,616	91.0%
WI - Wisconsin	85,878	5,474	6.4%	\$1,071	\$5,863,366	4,870	89.0%
WV - West Virginia	26,067	3,009	11.5%	\$1,194	\$3,593,889	2,709	90.0%
WY - Wyoming	7,786	950	12.2%	\$1,120	\$1,064,314	864	90.9%
Other	2,018	268	13.3%	\$1,044	\$279,894	255	95.1%

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## Appendix K-Table 4 Physical Therapy/Speech-Language Pathology Combined Cap Impact by Beneficiary Claim Diagnosis

Claim diagnosis group		Beneficiaries receiving PT/SLP services	Beneficiaries surpassing PT/SLP cap threshold	Percent of beneficiaries surpassing PT/SLP cap threshold	Average paid above PT/SLP cap threshold	Total paid above PT/SLP cap threshold
ICD-9 Code	Diagnosis Description					
<b>Total</b>	<b>All Reported Diagnoses</b>	<b>3,503,136</b>	<b>508,686</b>	<b>14.5%</b>	<b>\$1,263</b>	<b>\$642,383,941</b>
V57.1	Other physical therapy	339,701	4,320	1.3%	\$1,028	\$4,442,170
724.2	Lumbago	219,672	29,116	13.3%	\$1,206	\$35,110,984
781.2	Abnormality of gait	117,260	26,694	22.8%	\$1,283	\$34,250,271
787.2	Dysphagia	107,730	13,133	12.2%	\$1,346	\$17,673,078
719.41	Pain in joint, shoulder region	87,551	12,246	14.0%	\$1,100	\$13,469,375
723.1	Cervicalgia	80,907	9,102	11.2%	\$1,166	\$10,611,840
719.46	Pain in joint, lower leg	77,844	12,298	15.8%	\$1,172	\$14,413,625
436	Acute, but ill-defined, cerebrovascular disease	56,969	14,433	25.3%	\$1,846	\$26,636,823
715.96	Osteoarthritis, unspecified whether generalized or localized, lower leg	45,430	7,281	16.0%	\$1,128	\$8,214,643
729.5	Pain in limb	43,705	5,327	12.2%	\$1,381	\$7,354,030
726.10	Disorders of bursae and tendons in shoulder region, not elsewhere classified	43,578	6,484	14.9%	\$1,039	\$6,739,923
840.4	Sprains and strains, rotator cuff (capsule)	42,070	8,335	19.8%	\$988	\$8,234,147
724.02	Spinal stenosis, other than cervical, lumbar region	41,374	6,228	15.1%	\$995	\$6,199,476
719.45	Pain in joint, pelvic region and thigh	40,910	4,830	11.8%	\$1,076	\$5,195,486
724.5	Backache, unspecified	40,824	3,984	9.8%	\$1,255	\$5,000,239
715.16	Osteoarthritis, localized, primary, lower leg	37,813	7,806	20.6%	\$1,006	\$7,855,412
722.52	Degeneration of lumbar or lumbosacral intervertebral disc	34,824	4,325	12.4%	\$940	\$4,067,144
719.70	Difficulty in walking, site unspecified	33,551	9,661	28.8%	\$1,238	\$11,964,859
724.4	Thoracic or lumbosacral neuritis or radiculitis, unspecified	33,267	5,848	17.6%	\$1,148	\$6,716,311
847.2	Sprains and strains, lumbar	33,159	5,485	16.5%	\$1,275	\$6,994,856
728.2	Muscular wasting and disuse atrophy, not elsewhere classified	30,816	8,650	28.1%	\$1,439	\$12,449,859
847.0	Sprains and strains, neck	30,239	4,170	13.8%	\$1,127	\$4,700,883

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Claim diagnosis group		Beneficiaries receiving PT/SLP services	Beneficiaries surpassing PT/SLP cap threshold	Percent of beneficiaries surpassing PT/SLP cap threshold	Average paid above PT/SLP cap threshold	Total paid above PT/SLP cap threshold
ICD-9 Code	Diagnosis Description					
724.3	Sciatica	28,905	3,130	10.8%	\$1,007	\$3,152,880
715.90	Osteoarthritis, unspecified whether generalized or localized, site unspecified	28,341	5,661	20.0%	\$1,481	\$8,385,753
726.0	Adhesive capsulitis of shoulder	27,245	4,424	16.2%	\$1,008	\$4,460,542
728.9	Unspecified disorder of muscle, ligament, and fascia	25,793	6,069	23.5%	\$1,340	\$8,131,064
728.71	Plantar fascial fibromatosis	24,056	1,295	5.4%	\$812	\$1,051,670
726.2	Other affections of shoulder region, not elsewhere classified	23,947	3,281	13.7%	\$922	\$3,023,770
332.0	Parkinson's Disease, paralysis agitans	23,690	6,101	25.8%	\$1,581	\$9,644,400
799.3	Debility, unspecified	23,519	6,010	25.6%	\$1,386	\$8,330,161
726.5	Enthesopathy of hip region	21,623	2,197	10.2%	\$968	\$2,126,344
V43.65	Joint replacement, knee	21,153	4,405	20.8%	\$1,005	\$4,428,655
780.79	Other malaise and fatigue	21,056	4,102	19.5%	\$1,365	\$5,598,574
729.1	Myalgia and myositis, unspecified	20,428	2,277	11.1%	\$1,213	\$2,760,885
721.3	Lumbosacral spondylosis without myelopathy	19,147	2,674	14.0%	\$1,187	\$3,174,493
780.9	Other general symptoms	19,045	5,916	31.1%	\$1,451	\$8,582,519
722.10	Displacement of lumbar intervertebral disc without myelopathy	18,590	2,637	14.2%	\$1,099	\$2,898,248
V57.89	Other specified rehabilitation procedure, other	18,537	671	3.6%	\$1,277	\$857,115
728.85	Spasm of muscle	18,343	2,113	11.5%	\$1,202	\$2,539,488
721.0	Cervical spondylosis without myelopathy	17,798	2,149	12.1%	\$1,077	\$2,313,549
428.0	Congestive Heart Failure, unspecified	17,320	4,275	24.7%	\$1,356	\$5,796,986
820.8	Fracture of neck of femur, unspecified part, closed	16,618	4,467	26.9%	\$1,395	\$6,232,224
719.47	Pain in joint, ankle and foot	16,587	1,698	10.2%	\$1,026	\$1,742,182
723.4	Brachia neuritis or radiculitis NOS	16,514	2,837	17.2%	\$1,165	\$3,303,942
331.0	Alzheimer's Disease	15,796	3,152	20.0%	\$1,095	\$3,451,219
836.0	Tear of medial cartilage or meniscus of knee, current	15,756	1,875	11.9%	\$836	\$1,568,006
496	Chronic airway obstruction, not elsewhere classified	14,817	2,580	17.4%	\$1,331	\$3,435,064

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ICD-9 Code	Diagnosis Description					
722.4	Degeneration of cervical intervertebral disc	14,787	1,731	11.7%	\$909	\$1,573,046
781.3	Lack of coordination	13,152	2,788	21.2%	\$1,371	\$3,823,101
V57.3	Speech therapy	12,782	267	2.1%	\$1,357	\$362,327
715.95	Osteoarthritis, unspecified whether generalized or localized, pelvic region and thigh	12,396	1,579	12.7%	\$1,033	\$1,630,349
715.36	Osteoarthritis, localized, unspecified primary/ secondary, lower leg	12,362	1,625	13.1%	\$1,074	\$1,744,486
780.4	Dizziness and giddiness	12,349	812	6.6%	\$1,079	\$875,977
727.61	Complete rupture of rotator cuff, non-traumatic	12,194	3,287	27.0%	\$1,025	\$3,367,959
846.0	Sprains and strains, lumbosacral (joint) (ligament)	12,079	1,664	13.8%	\$1,081	\$1,799,500
354.0	Carpal Tunnel Syndrome	11,703	1,066	9.1%	\$960	\$1,023,541
715.09	Osteoarthritis, generalized, multiple sites	11,401	3,398	29.8%	\$1,675	\$5,693,315
724.00	Spinal stenosis, other than cervical, unspecified region	10,693	1,206	11.3%	\$1,114	\$1,343,508
486	Pneumonia, organism unspecified	10,388	2,402	23.1%	\$1,367	\$3,284,062
840.9	Sprains and strains, unspecified part of shoulder and upper arm	10,266	1,795	17.5%	\$1,400	\$2,513,736
721.90	Spondylosis of unspecified site, without mention of myelopathy	10,190	1,593	15.6%	\$1,106	\$1,762,431
724.1	Pain in thoracic spine	10,070	1,074	10.7%	\$1,106	\$1,187,328
250.00	Type II Diabetes Mellitus or unspecified type, not stated as uncontrolled, without mention of complication	9,979	2,605	26.1%	\$1,459	\$3,800,591
401.9	Essential hypertension, unspecified	9,836	2,876	29.2%	\$1,445	\$4,156,597
715.15	Osteoarthritis, localized, primary, pelvic region and thigh	9,414	1,557	16.5%	\$1,105	\$1,719,784
457.1	Other lymphadema	9,194	921	10.0%	\$1,214	\$1,117,864
812.00	Fracture of humerus, upper end, unspecified part	9,115	1,965	21.6%	\$1,056	\$2,074,981
719.79	Difficulty in walking, multiple sites	9,069	2,788	30.7%	\$1,268	\$3,534,794
726.90	Enthesopathy of unspecified site, capsulitis, periarthritis, tendonitis	8,858	702	7.9%	\$1,052	\$738,778
V57.21	Occupational therapy encounter	8,792	303	3.4%	\$1,199	\$363,400
714.0	Rheumatoid arthritis	8,747	1,264	14.5%	\$1,376	\$1,738,645

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ICD-9 Code	Diagnosis Description					
715.00	Osteoarthritis, generalized, site unspecified	8,628	2,410	27.9%	\$1,498	\$3,609,867
844.9	Sprains and strains, knee and leg, unspecified site	8,583	1,844	21.5%	\$1,641	\$3,026,631
733.00	Osteoporosis, unspecified	8,190	1,507	18.4%	\$1,141	\$1,719,366
726.11	Calcifying tendonitis of shoulder	8,160	1,510	18.5%	\$1,067	\$1,611,910
290.0	Senile dementia, uncomplicated	8,014	1,766	22.0%	\$1,107	\$1,954,362
340	Multiple sclerosis	7,944	1,476	18.6%	\$1,605	\$2,368,759
V43.64	Joint replacement, hip	7,865	1,476	18.8%	\$1,132	\$1,671,024
726.71	Achilles bursitis and tendonitis	7,822	715	9.1%	\$876	\$626,011
845.00	Sprains and strains, ankle, unspecified site	7,470	806	10.8%	\$959	\$773,083
438.0	Late effects of cerebrovascular disease, cognitive deficits	7,366	2,458	33.4%	\$1,610	\$3,958,511
438.20	Late effects of cerebrovascular disease, hemiplegia affecting unspecified side	7,203	1,367	19.0%	\$1,750	\$2,392,100
812.20	Fracture of humerus, unspecified part	6,640	1,539	23.2%	\$1,112	\$1,711,430
294.8	Other specified organic brain syndromes (chronic)	6,546	1,243	19.0%	\$1,119	\$1,390,345
847.1	Sprains and strains, thoracic	6,512	907	13.9%	\$1,512	\$1,371,729
707.0	Decubitus ulcer	6,437	1,627	25.3%	\$2,301	\$3,743,906
722.6	Degeneration of intervertebral disc, site unspecified	6,434	954	14.8%	\$1,387	\$1,323,580
715.91	Osteoarthritis, unspecified whether generalized or localized, shoulder region	6,421	1,138	17.7%	\$1,177	\$1,339,858
782.3	Edema	6,391	622	9.7%	\$1,218	\$757,285
719.76	Difficulty in walking, lower leg	6,326	1,538	24.3%	\$1,182	\$1,818,070
719.75	Difficulty in walking, pelvic region and thigh	6,202	1,649	26.6%	\$1,175	\$1,938,037
729.89	Other musculoskeletal symptoms referable to limbs, other	6,168	950	15.4%	\$1,308	\$1,242,344
599.0	Urinary tract infection, site not specified	6,144	1,485	24.2%	\$1,405	\$2,086,083
V72.83	Other specified preoperative examination	5,981	203	3.4%	\$813	\$164,970
824.8	Fracture of ankle, unspecified, closed	5,885	877	14.9%	\$1,045	\$916,193

*Appendix K – Estimated Impact of PT/SLP Cap*

*Utilization Analysis – High Expenditures Use of Therapy Services CY 2002 Beneficiary Characteristics*

*Outpatient Rehabilitation Services Payment System Evaluation Contract*

*Task Order # 500-99-0009/0009*

*Deliverable #7 Analysis of Costliest Top 5% Report – Final*

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Claim diagnosis group		Beneficiaries receiving PT/SLP services	Beneficiaries surpassing PT/SLP cap threshold	Percent of beneficiaries surpassing PT/SLP cap threshold	Average paid above PT/SLP cap threshold	Total paid above PT/SLP cap threshold
ICD-9 Code	Diagnosis Description					
438.9	Late effects of cerebrovascular disease, unspecified late effects of cerebrovascular disease	5,792	1,178	20.3%	\$1,522	\$1,793,199
715.98	Osteoarthritis, unspecified whether generalized or localized, other specified sites	5,753	892	15.5%	\$1,200	\$1,070,373
716.90	Arthropathy, unspecified, site unspecified	5,743	1,113	19.4%	\$1,399	\$1,556,887
726.73	Calcaneal spur	5,695	311	5.5%	\$790	\$245,821

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