

Specialty	Medicare Allowed Charges (\$ in Millions)	RVU Changes	Physician Fee Schedule Update	Total
<b>Practitioners:</b>				
AUDIOLOGIST	\$ 25	-1%	-4.2%	-5%
CHIROPRACTOR	\$ 596	0%	-4.2%	-4%
CLINICAL PSYCHOLOGIST	\$ 452	0%	-4.2%	-4%
CLINICAL SOCIAL WORKER	\$ 278	0%	-4.2%	-4%
NURSE ANESTHETIST	\$ 433	0%	-4.2%	-4%
NURSE PRACTITIONER	\$ 438	-1%	-4.2%	-5%
OPTOMETRY	\$ 626	1%	-4.2%	-3%
ORAL/MAXILLOFACIAL SURGERY	\$ 33	8%	-4.2%	3%
PHYSICAL/OCCUPATIONAL THERAPY	\$ 842	0%	-4.2%	-5%
PHYSICIANS ASSISTANT	\$ 326	0%	-4.2%	-4%
PODIATRY	\$ 1,319	-1%	-4.2%	-5%
<b>Suppliers:</b>				
DIAGNOSTIC TESTING FACILITY	\$ 735	0%	-4.2%	-5%
INDEPENDENT LABORATORY	\$ 517	2%	-4.2%	-3%
PORTABLE X-RAY SUPPLIER	\$ 82	-1%	-4.2%	-5%
<b>Other:</b>				
ALL OTHER	\$ 55	0%	-4.2%	-4%
ALL PHYSICIAN FEE SCHEDULE	\$ 61,444	0%	-4.2%	-4%

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Table 13 shows the impact on payments for selected high volume procedures of all of the changes previously discussed. This table shows the combined impact of the change in the practice expense RVUs and the estimated physician fee schedule update on total payment for the procedure.

There are separate columns that show the change in the facility rates and the non-facility rates. For an explanation of facility and non-facility practice expense refer to § 414.22(b)(5)(i). The table shows the estimated change in payment rates based on provisions of this proposed rule and the estimated

physician fee schedule update. If we change any of the provisions following the consideration of public comments, these figures may change. Further, the payment amounts shown for 2003 will change once we determine the final figure for the physician fee schedule update.