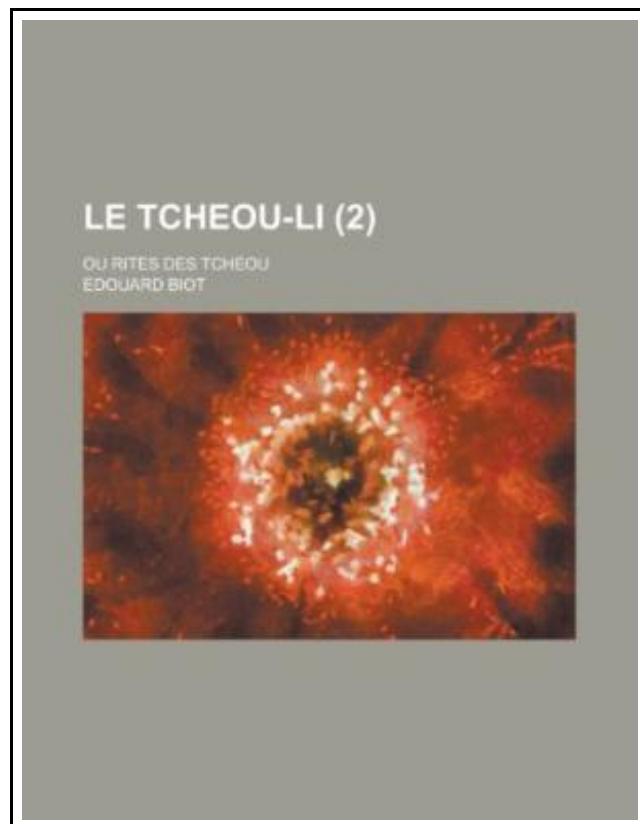


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(Prof. Antone Olson II)

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RareBooksClub. Paperback. Book Condition: New. This item is printed on demand. Paperback. 72 pages. LC Number: KF27 . E553 2004b OCLC Number: (OCOlc)56744152 Subject: Medical fees -- United States. Excerpt: . . . 11 STATEMENTS OF A. BRUCE STEINWALD, DIRECTOR, HEALTH CARE - ECONOMIC AND PAYMENT ISSUES, U. S. GENERAL ACCOUNTING OFFICE; DOUGLAS HOLTZ-EAKIN, DIRECTOR, CONGRESSIONAL BUDGET OFFICE; AND GLENN M. HACKBARTH, CHAIRMAN, MEDICARE PAYMENT ADVISORY COMMISSION TEINWALD Mr. S. Mr. Chairman and Members of the Sub-committee, I am pleased to be here with you today to discuss the system used to set and update fees paid to physicians under the Medicare Program. In my prepared testimony, I have attempted to provide a concise history of this system, and the related spending trends, with emphasis on the use of spending targets to control growth in physician service expenditures. In my remarks to you today, I want to focus on trends in the volume and intensity of physician services over the past several years, and the relationship between Medicare fees and physician spending per Medicare beneficiary over time. I believe that an examination of these trends and relationships is vital to both understanding and confronting the difficult budgetary situation that you mentioned we are looking ahead to in 2006. Please direct your attention to the first chart at the front of the room. Its on your left, on my right, and it is also Figure 3 on page eight of the written statement. This chart shows trends in the volume and intensity of physician services per Medicare beneficiary from 1975 through 2003. Volume growth is simply the increase in the average number of services performed per beneficiary from year to year. Intensity is said to grow if over time more complex and, therefore, more expensive services tend to replace less complex, . . .

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