

# Doctor density linked to billing for dermatology procedures

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density quintiles. This trend suggests a \$14.81 increase in Medicare spending on dermatology procedures for each interval increase of 10 dermatologists per 100,000 persons aged 65 years and older. Use of these procedures differed among clinician types; dermatologists mainly performed premalignant lesion destruction, while [primary care physicians](#) mainly performed injections.

"Higher [dermatologist](#) density is correlated with increased utilization of dermatology procedures and subsequent billed charges to Medicare," the authors write. "Further research is needed to determine the effect of such variations on outcomes and whether incentives can better align dermatologists with areas of clinical need."

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(HealthDay)—Higher dermatologist density is associated with increased use of dermatology procedures and billing to Medicare, according to a study published online Nov. 29 in *JAMA Dermatology*.

Sally Y. Tan, M.P.H., from Harvard Medical School in Boston, and colleagues conducted a cross-sectional study using the Medicare Provider Utilization and Payment database to characterize the effect of geographic variations in dermatologist density on the provision of dermatology procedures in Medicare. Dermatology-related procedures were defined by the top 50 billing codes, which accounted for more than 95 percent of procedures billed by dermatologists. A total of 10,391 dermatologists were included.

The researchers found that dermatologists billed Medicare for 28 million procedures costing \$2.21 billion in 2013. Per person aged 65 years or older, the mean billed amount by dermatologists was \$15.87 and \$92.02 in the lowest- and highest-

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