



2009 Medicare National Unadjusted Average Physician, Hospital Outpatient & ASC Payment Rates*

CPT® Code	Code Description	Physician Payment		Hospital Outpatient Payment	ASC Payment
		In-Office	In-Facility		
Treatment of Benign Prostatic Hyperplasia (BPH)					
52648	Laser vaporization of prostate, including control of postoperative bleeding, complete	\$2,269	\$710	\$3,026	\$1,577
52649	Laser enucleation of the prostate with morcellation, including control of postoperative bleeding, complete	-	\$1015	\$3,026	-
Treatment of Tumors/Lesions					
52214	Cystourethroscopy, with fulguration (including cryosurgery or laser surgery) of trigone, bladder neck, prostatic fossa, urethra, or periurethral glands	\$597	\$228	\$1,690	\$734
52224	Cystourethroscopy, with fulguration (including cryosurgery or laser surgery) or treatment of MINOR (less than 0.5 cm) lesion(s) with or without biopsy	\$850	\$178	\$1,690	\$734
52234	Cystourethroscopy, with fulguration (including cryosurgery or laser surgery) and/or resection of; SMALL bladder tumor(s) (0.5 up to 2.0 cm)	-	\$259	\$1,690	\$734
52235	Cystourethroscopy, with fulguration (including cryosurgery or laser surgery) and/or resection of; MEDIUM bladder tumor(s) (2.0 to 5.0 cm)	-	\$304	\$1,690	\$765
52240	Cystourethroscopy, with fulguration (including cryosurgery or laser surgery) and/or resection of; LARGE bladder tumor(s)	-	\$532	\$1,690	\$765
52355	Cystourethroscopy, with ureteroscopy and/or pyeloscopy; with resection of ureteral or renal pelvic tumor	-	\$492	\$1,690	\$824
Treatment of Strictures					
52341	Cystourethroscopy; with treatment of ureteral stricture (eg, balloon dilation, laser, electrocautery, and incision)	-	\$308	\$1,690	\$765
52342	Cystourethroscopy; with treatment of ureteropelvic junction stricture (eg, balloon dilation, laser, electrocautery, and incision)	-	\$334	\$1,690	\$765
52343	Cystourethroscopy; with treatment of intra-renal stricture (eg, balloon dilation, laser, electrocautery, and incision)	-	\$372	\$1,690	\$765
52344	Cystourethroscopy with ureteroscopy; with treatment of ureteral stricture (eg, balloon dilation, laser, electrocautery, and incision)	-	\$403	\$1,690	\$765
52345	Cystourethroscopy with ureteroscopy; with treatment of ureteropelvic junction stricture (eg, balloon dilation, laser, electrocautery, and incision)	-	\$430	\$1,690	\$765
52346	Cystourethroscopy with ureteroscopy; with treatment of intra-renal stricture (eg, balloon dilation, laser, electrocautery, and incision)	-	\$485	\$1,690	\$765
Treatment of Bladder, Urethra and Ureter Stones					
52310	Cystourethroscopy, with removal of foreign body, calculus, or ureteral stent from urethra or bladder (separate procedure); simple	\$260	\$159	\$1,241	\$574
52315	Cystourethroscopy, with removal of foreign body, calculus, or ureteral stent from urethra or bladder (separate procedure); complicated	\$461	\$289	\$1,690	\$734

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*Federal Register, Vol. 73:224, November 19, 2008 and Vol. 73:223, November 18, 2008. Actual payment rates will vary based on geographical adjustments to payments.

**Federal Register, Vol. 73:161, August 19, 2008 and Vol. 73:193, October 3, 2008, Table 1B, 1D, and 5. Effective October 1, 2008.

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Treatment of Bladder, Urethra and Ureter Stones					
52317	Litholapaxy: crushing or fragmentation of calculus by any means in bladder and removal of fragments; simple or small (less than 2.5 cm)	\$981	\$367	\$1,690	\$679
52318	Litholapaxy: crushing or fragmentation of calculus by any means in bladder and removal of fragments; complicated or large (over 2.5 cm)	-	\$500	\$1,690	\$734
52332	Cystourethroscopy, with insertion of indwelling ureteral stent (e.g., Gibbons or double-J type)	\$494	\$164	\$1,690	\$734
52352	Cystourethroscopy, with ureteroscopy and/or pyeloscopy; with removal or manipulation of calculus (ureteral catheterization is included)	-	\$388	\$1,690	\$824
52353	Cystourethroscopy, with ureteroscopy and/or pyeloscopy; with lithotripsy (ureteral catheterization is included)	-	\$447	\$2,369	\$1,031

2009 Medicare National Unadjusted Average MS-DRG and Hospital Inpatient Payment Rates**

MS-DRG	MS-DRG Description	Payment
656	Kidney and ureter procedures for neoplasm with MCC	\$18,202
657	Kidney and ureter procedures for neoplasm with CC	\$10,342
658	Kidney and ureter procedures for neoplasm without CC/MCC	\$7,643
659	Kidney and ureter procedures for non-neoplasms with MCC	\$18,518
660	Kidney and ureter procedures for non-neoplasm with CC	\$10,505
661	Kidney and ureter procedures for non-neoplasm without CC/MCC	\$6,976
662	Minor bladder procedures with MCC	\$15,052
663	Minor bladder procedures with CC	\$8,012
664	Minor bladder procedures without CC/MCC	\$5,509
668	Transurethral procedures with MCC	\$12,432
669	Transurethral procedures with CC	\$6,680
670	Transurethral procedures without CC/MCC	\$4,266
671	Urethral procedures with CC/MCC	\$7,897
672	Urethral procedures without CC/MCC	\$4,411
673	Other kidney & urinary tract procedures with MCC	\$15,383
674	Other kidney & urinary tract procedures with CC	\$11,986
675	Other kidney & urinary tract procedures without CC/MCC	\$7,269
713	Transurethral prostatectomy with CC/MCC	\$6,209
714	Transurethral prostatectomy without CC/MCC	\$3,512

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