

2011 MOST COMMONLY BILLED CODES

53850 Transurethral Destruction of Prostate Tissue by Microwave Thermotherapy (TUMT)

Physician Office	Physician			Office	Device	Global
	CPT	RVU	Payment*	Payment	Payment	Days
	53850	69.18	\$2,350	Included in global fee to Physician	Payment for device included in global payment to Physician	90

* Medicare physician reimbursement rate is calculated using the 2011 conversion factor of \$33.9764.

Ambulatory Surgery Center	Physician			ASC	Device
	CPT	RVU	Payment	Payment	Payment
	53850	17.29	\$587	\$1,492	Payment for device included in global payment to ASC

Hospital Outpatient	Physician			Outpatient Hospital		Device	
	CPT	RVU	Payment	APC	Payment	HCPCS	Payment
	53850	17.29	\$587	429	\$3,201	N/A	Payment for device included in global APC payment

Hospital Inpatient	Physician			Inpatient Hospital			Device
	CPT	RVU	Payment	Possible MS-DRG for all CPT codes*		Payment**	Payment
	53850	17.29	\$587	665	Prostatectomy w/MCC	\$16,000	Payment for device included in global MS-DRG payment
666				Prostatectomy w/CC	\$9,180		
667				Prostatectomy w/o CC/MCC	\$4,422		
713				Transurethral Prostatectomy w/CC/MCC	\$6,590		
714				Transurethral Prostatectomy w/o CC/MCC	\$3,654		

*Complications and Comorbidities: CMS developed a standard list of diagnoses that are recognized as CCs for MS-DRGs. When a CC is present as a secondary diagnosis, it may affect the MS-DRG assignment.

**These averages are calculated by multiplying the current relative weight of the MS-DRG by the national average hospital Medicare base rate and this includes the capital rate.

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ICD-9-CM Diagnostic Coding Options	
600.00	Hypertrophy (benign) of prostate w/o urinary obstruction and other lower urinary tract symptoms (LUTS)
600.01	Hypertrophy (benign) of prostate w/urinary obstruction and other lower urinary tract symptoms (LUTS)
600.10	Nodular prostate w/o urinary obstruction
600.11	Nodular prostate w/urinary obstruction
600.20	Benign localized hyperplasia of prostate w/o urinary obstruction and other lower urinary tract symptoms (LUTS)
600.21	Benign localized hyperplasia of prostate w/urinary obstruction and other lower urinary tract symptoms (LUTS)
600.3	Cyst of prostate
600.90	Hyperplasia of prostate, unspecified, w/o urinary obstruction and other lower urinary tract symptoms (LUTS)
600.91	Hyperplasia of prostate, unspecified, w/urinary obstruction and other lower urinary tract symptoms (LUTS)

ICD-9-CM Procedural Coding Options	
60.96	Transurethral destruction of prostate by microwave thermotherapy

Disclaimer: While reasonable efforts have been made to ensure the accuracy of the information set forth, AMS, Inc. cannot guarantee reimbursement for any procedure or product. It is the responsibility of the medical provider to contact payers for specific coverage and billing/coding policies as well as update the information described herein. Reimbursement rates quoted are 2011 Medicare national averages.

Coding Resources:

1. CPT 2011. Current Procedural Terminology. Professional Edition. CPT is a trademark of the American Medical Association
2. ICD-9-CM for Hospitals—Vol. 1, 2, 3 Expert 2011. Ingenix, Inc. Salt Lake City, UT
3. HCPCS Level II Expert 2011. Ingenix, Inc. Salt Lake City, UT
4. DRG Expert 2011. Ingenix, Inc. Salt Lake City, UT
5. MarketScan® Research Data © 2010 Thomson Reuters
6. Federal Register, Vol. 75, No. 226, Nov. 24, 2010
7. Federal Register, Vol. 75, No. 157, Aug. 16, 2010
8. Federal Register, Vol. 75, No. 228, Nov. 29, 2010
9. Federal Register, Vol. 76, No. 7, Jan. 11, 2011
10. CMS, and DHHS. "Pub. 100-20 One-Time Notification." Transmittal 828. Change Request 7300. Jan. 13, 2010