

2018 Coding and Reimbursement Guide for Physicians



Please note that all amounts shown are The National Averages and may not reflect the actual reimbursement amount in your state. Payer policies will vary and should be verified prior to treatment for limitations on diagnosis, coding or site of service requirements.

Cystoscopy

PHYSICIAN RELATIVE VALUE UNITS:

CPT® Code	Office Based				Facility Based			
	Work RVU	Practice RVU	Malpractice RVU	Total RVUs	Work RVU	Practice RVU	Malpractice RVU	Total RVUs
52000	1.53	3.03	.17	4.73	1.53	0.68	.17	2.38

CODING AND MEDICARE NATIONAL AVERAGE REIMBURSEMENT:

CPT® Code	Description	National Average Medicare Rate			
		In-Office	Hospital In-Patient	Hospital Out-Patient	ASC*
52000	Cystourethroscopy (separate procedure)	\$170.28	\$85.68	\$565.60	\$294.63

*Please see CPT codes for cystoscopy relevant to your specific procedure.

Urodynamic Procedures on the Bladder

PHYSICIAN RELATIVE VALUE UNITS:

CPT® Code	Total RVU
51725	5.23
51741	0.43
51798	0.44

CODING AND MEDICARE NATIONAL AVERAGE REIMBURSEMENT:

CPT® Code	Description	National Average Medicare Rate		
		In-Office and Hospital In-Patient	Hospital Out-Patient	ASC*
51725	Cystometrogram (CMG) (e.g. spinal manometer)	\$193.32	\$193.32	\$193.32
51741	Complex uroflowmetry (e.g. calibrated electronic equipment)	\$16.20	\$16.20	\$16.20
51798	Measurement of post-voiding residual urine and/or bladder capacity by ultrasound, non-imaging	\$16.20	\$16.20	\$16.20

N = Paid under OPPS; Payment is packaged into payment for other services, including outliers. Therefore, there is no separate APC payment.

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