

PROSTATE RESECTION PROCEDURES - INPATIENT

HOSPITAL INPATIENT

ICD-9 Code	Description	ICD-10 Code	Description
60.29	Other transurethral prostatectomy	0VB07ZZ	Excision of Prostate, Via Natural or Artificial Opening
		0VB08ZZ	Excision of Prostate, Via Natural or Artificial Opening Endoscopic
		0VT07ZZ	Resection of Prostate, Via Natural or Artificial Opening
		0VT08ZZ	Resection of Prostate, Via Natural or Artificial Opening Endoscopic
60.69	Other prostatectomy	0VT00ZZ	Resection of Prostate, Open Approach
		0VT04ZZ	Resection of Prostate, Percutaneous Endoscopic Approach
		0VT07ZZ	Resection of Prostate, Via Natural or Artificial Opening
		0VT08ZZ	Resection of Prostate, Via Natural or Artificial Opening Endoscopic

MS-DRG	Description	Hospital Inpatient Allowed Amount
713	Transurethral Prostatectomy with CC/MCC	\$9,510
714	Transurethral Prostatectomy without CC/MCC	\$5,015

Note: Specific crosswalks may vary from the Centers for Medicare & Medicaid Services' General Equivalency Mappings

Inpatient payment amounts effective through 9/30/2017. MS DRG payment calculated with an average hospital base rate of \$5962.93. Base rate of \$5962.93 includes the national standardized labor amounts for wage index greater than 1 for hospital submitting quality and capital adjustment amounts.

Represents National Average Medicare Fees (Without Geographic Adjustment) Last Updated January 2017.

Sources:

ICD-9 & Description: CMS. Version 32 Full and Abbreviated Code Titles, released 2014-10-1

ICD-10 & Description: CMS. 2017 PCS Long and Abbreviated Titles, released 2016

ICD-9 to ICD-10 Crosswalk: CMS. 2017 ICD-10 PCS and General Equivalence Mappings (GEMs) Files, released 2016

Inpatient Hospital: CMS-1655-F; CMS-1664-F; CMS-1632-F2; CMS-1655-CN2; CMS-1655-CN3, released 2016-10-31

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