

**PROSTATE RESECTION PROCEDURES**

<b>HOSPITAL INPATIENT</b>			
<b>ICD-9 Code</b>	<b>Description</b>	<b>ICD-10 Code</b>	<b>Description</b>
60.29	Other transurethral prostatectomy	OVB07ZZ	Excision of Prostate, Via Natural or Artificial Opening
		OVB08ZZ	Excision of Prostate, Via Natural or Artificial Opening Endoscopic
		OVT07ZZ	Resection of Prostate, Via Natural or Artificial Opening
		OVT08ZZ	Resection of Prostate, Via Natural or Artificial Opening Endoscopic
60.69	Other prostatectomy	OVT00ZZ	Resection of Prostate, Open Approach
		OVT04ZZ	Resection of Prostate, Percutaneous Endoscopic Approach
		OVT07ZZ	Resection of Prostate, Via Natural or Artificial Opening
		OVT08ZZ	Resection of Prostate, Via Natural or Artificial Opening Endoscopic
<b>MS-DRG</b>	<b>Description</b>	<b>Hospital Inpatient Allowed Amount</b>	
713	Transurethral Prostatectomy with CC/MCC	\$8,586	
714	Transurethral Prostatectomy without CC/MCC	\$5,314	

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

Inpatient payment amounts effective 10/1/2017 through 9/30/2018. MS DRG payment calculated with an average hospital base rate of \$6028.08. Base rate of \$6028.08 includes the national adjusted operating standardized amounts, labor 68.3% share and 31.7% share, for hospitals submitting quality and EHR data plus capital adjustment amounts. Represents National Average Medicare Fees (Without Geographic Adjustment) Last Updated August 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-1677-F, released 2017-08-09 tables 1A, 1D and 5.

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