

**PROSTATE RESECTION PROCEDURES**

CPT® Codes	Description	Physician Allowed Amount for Hospital/ ASC	Physician Allowed Amount for Office	Hospital Outpatient Allowed Amount	ASC Allowed Amount
<b>PROSTATE RESECTION</b>					
52601	Transurethral electrosurgical resection of prostate, including control of postoperative bleeding, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy are included)	\$877	N/A	\$3,483	\$1,739
52647	Laser coagulation of prostate, including control of postoperative bleeding, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy are included if performed)	\$671	\$1,819	\$3,483	\$1,739
52648	Laser vaporization of prostate, including control of postoperative bleeding, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, internal urethrotomy and transurethral resection of prostate are included if performed)	\$715	\$1,872	\$3,483	\$1,739
52649	Laser enucleation of the prostate with morcellation, including control of postoperative bleeding, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, internal urethrotomy and transurethral resection of prostate are included if performed)	\$853	N/A	\$3,483	\$1,739

N/A signifies Medicare expects that rarely if ever, will this procedure be performed in this setting.

Hospital outpatient/ASC payment amounts effective through 12/31/2017. Physician payment amounts based on \$35.8887 conversion factor effective through 12/31/2017. Represents National Average Medicare Fees (Without Geographic Adjustment) Updated January 2017.

**Sources:**

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Physician Fee Schedule: CMS-1654-F, addendum B update released 2016-11-02

ASC Fee Schedule: CMS-1656-FC, addendum AA update released 2016-11-02

Hospital Outpatient: CMS-1656-FC, addendum B released 2016-10-27

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