

# Endourology

## US Coding and Payment Reference for Hospital Outpatient and Ambulatory Surgery Center

This coding reference guide is intended to provide common coding and reimbursement information for cystoscopic, ureteroscopic and percutaneous stone management procedures.

The Medicare rates listed below are reflective of 2024 Medicare national average reimbursement rates (rounded up or down to nearest dollar) and will vary due to geographic adjustment and other factors. These rates are subject to change without notice. Specific payer policies, requirements, or rates may vary from CMS standards and should be reviewed prior to treatment.

CMS expects, for Medicare billing, that the suggested C-Code should always be reported as well as the associated device costs. These are tracking codes that inform future APC payment rates. These do not trigger additional payment and only apply to Medicare hospital outpatient claims.

### 2024 Procedural Coding and Payment Reference

Effective January 1, 2024

CPT Code	Code Description	Hospital Outpatient Payment	ASC Payment
<b>Cystoscopic and Ureteroscopic Stone Management &amp; Ureteral Stent Placement</b>			
50080	Percutaneous nephrolithotomy or pyelolithotomy, lithotripsy, stone extraction, antegrade ureteroscopy, antegrade stent placement and nephrostomy tube placement, when performed, including imaging guidance; simple (eg stone[s]) up to 2 cm in single location of kidney or renal pelvis, nonbranching stones)	\$8,787	\$4,546
50081	Percutaneous nephrolithotomy or pyelolithotomy, lithotripsy, stone extraction, antegrade ureteroscopy, antegrade stent placement and nephrostomy tube placement, when performed, including imaging guidance; complex (eg stone[s]>2cm, branching stones, stones in multiple locations, ureter stones, complicated anatomy)	\$8,787	\$4,546
50385	Removal (via snare/capture) and replacement of internally dwelling ureteral stent via transurethral approach, without use of cystoscopy, including radiological supervision and interpretation	\$1,943	\$930
50432	Placement of nephrostomy catheter, percutaneous, including diagnostic nephrostogram and/or ureterogram when performed, imaging guidance (eg, ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation	\$1,943	\$930
50433	Placement of nephroureteral catheter, percutaneous, including diagnostic nephrostogram and/or ureterogram when performed, imaging guidance (eg, ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation, new access	\$3,325	\$1,626
50434	Convert nephrostomy catheter to nephroureteral catheter, percutaneous, including diagnostic nephrostogram and/or ureterogram when performed, imaging guidance (eg, ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation, via pre-existing nephrostomy tract	\$1,943	\$930
50435	Exchange nephrostomy catheter, percutaneous, including diagnostic nephrostogram and/or ureterogram when performed, imaging guidance (eg, ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation	\$1,943	\$930
50436	Dilation of existing tract, percutaneous, for an endourologic procedure including imaging guidance (eg, ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation, with postprocedure tube placement, when performed	\$3,325	\$1,626
50437	Dilation of existing tract, percutaneous, for an endourologic procedure including imaging guidance (eg, ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation, with post-procedure tube placement, when performed; including new access into the renal collecting system	\$3,325	\$1,626
50605	Ureterotomy for insertion of indwelling stent, all types	Inpatient Only	
50693	Placement of ureteral stent, percutaneous, including diagnostic nephrostogram and/or ureterogram when performed, imaging guidance (eg, ultrasound and/or fluoroscopy), and all associated radiological supervision and interpretation; pre-existing nephrostomy tract	\$3,325	\$1,626
50694	Placement of ureteral stent, percutaneous, including diagnostic nephrostogram and/or ureterogram when performed, imaging guidance (eg, ultrasound and/or fluoroscopy), and all associated radiological supervision and interpretation; new access, without separate nephrostomy catheter	\$3,325	\$1,626

CPT Code	Code Description	Hospital Outpatient Payment	ASC Payment
50695	Placement of ureteral stent, percutaneous, including diagnostic nephrostogram and/or ureterogram when performed, imaging guidance (eg, ultrasound and/or fluoroscopy), and all associated radiological supervision and interpretation; new access, with separate nephrostomy catheter	\$3,325	\$1,626
50947	Laparoscopy, surgical; with ureteroneocystostomy, with cystoscopy and ureteral stent placement	\$9,818	\$4,541
51045	Cystotomy, with insertion of ureteral catheter or stent (separate procedure)	\$1,943	\$930
51702	Insertion of temporary indwelling bladder catheter; simple (eg, Foley)	\$122	-
51703	Insertion of temporary indwelling bladder catheter; complicated (eg, altered anatomy, fractured catheter/balloon)	\$149	\$81
52005	Cystourethroscopy, with ureteral catheterization, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service	\$1,943	\$930
52204	Cystourethroscopy, with biopsy(s)	\$1,943	\$930
52214	Cystourethroscopy, with fulguration (including cryosurgery or laser surgery) of trigone, bladder neck, prostatic fossa, urethra, or periurethral glands	\$3,325	\$1,626
52224	Cystourethroscopy, with fulguration (including cryosurgery or laser surgery) or treatment of MINOR (less than 0.5 cm) lesion(s) with or without biopsy	\$3,325	\$1,626
52234	Cystourethroscopy, with fulguration (including cryosurgery or laser surgery) and/or resection of; SMALL bladder tumor(s) (0.5 up to 2.0 cm)	\$3,325	\$1,626
52235	Cystourethroscopy, with fulguration (including cryosurgery or laser surgery) and/or resection of; MEDIUM bladder tumor(s) (2.0 to 5.0 cm)	\$3,325	\$1,626
52240	Cystourethroscopy, with fulguration (including cryosurgery or laser surgery) and/or resection of; LARGE bladder tumor(s)	\$4,935	\$2,471
52310	Cystourethroscopy, with removal of foreign body, calculus or ureteral stent from urethra or bladder (separate procedure); simple	\$1,943	\$930
52315	Cystourethroscopy, with removal of foreign body, calculus or ureteral stent from urethra or bladder (separate procedure); complicated	\$1,943	\$930
52317	Litholapaxy: crushing or fragmentation of calculus by any means in bladder and removal of fragments; simple or small (less than 2.5 cm)	\$3,325	\$1,626
52318	Litholapaxy: crushing or fragmentation of calculus by any means in bladder and removal of fragments; complicated or large (over 2.5 cm)	\$3,325	\$1,626
52320	Cystourethroscopy (including ureteral catheterization); with removal of ureteral calculus	\$3,325	\$1,626
52332	Cystourethroscopy, with insertion of indwelling ureteral stent (eg, Gibbons or double-J type)	\$3,325	\$1,626
52352	Cystourethroscopy, with ureteroscopy and/or pyeloscopy; with removal or manipulation of calculus (ureteral catheterization is included)	\$3,325	\$1,626
52353	Cystourethroscopy, with ureteroscopy and/or pyeloscopy; with lithotripsy (ureteral catheterization is included)	\$4,935	\$2,471
52356	Cystourethroscopy, with ureteroscopy and/or pyeloscopy; with lithotripsy including insertion of indwelling stent (eg, Gibbons or double-J type)	\$4,935	\$2,471
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)	\$4,935	\$2,471
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)	\$4,935	\$2,471
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)	\$4,935	\$2,471

\*Packaged service/item; no separate payment made.

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**ICD-10-CM Diagnosis Codes commonly associated with endourology procedures**

Diagnosis Codes	Code Description
N20.0-N20.9	Calculus of kidney and ureter
N21.0-N21.9	Calculus of lower urinary tract
N13.2-N13.4	Obstructive and reflux uropathy
N22	Calculus of urinary tract in diseases classified elsewhere
Q63.8-Q63.9	Other congenital malformations of kidney
Z87.442	Personal history of urinary calculi

HCPCS Codes	Code Description
C1747	Endoscope, single-use (i.e., disposable), urinary tract, imaging/illumination device (insertable)

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Contact your Medicare contractor or other payer for interpretation of coverage, coding, and payment policies since reimbursement policy can vary widely and frequently changes, often without notice.

This information is not intended to replace any advice you receive from your own internal or external insurance coverage consultants, reimbursement specialists or legal counsel.

#### Data Sources

- 2024 Current Procedural Terminology (CPT) Copyright 2023 American Medical Association. All rights reserved. CPT is a registered trademark of the American Medical Association.
- Physician payment rates are 2024 national averages. Source: Centers for Medicare & Medicaid Services CY2024 Physician Fee Schedule Final Rule: Addendum B.
- Medicare payment rates calculated using a conversion factor of 32.74 Based on CY2024 Relative Value Units (RVU) information available as of January 2024.
- 2024 ICD-10-CM.
- 2024 ICD-10-PCS.
- 2024 HCPCS Level II Expert.
- Centers for Medicare & Medicaid Services CY2024 Hospital OPPS Final Rule: Addendum A, Addendum B.
- Centers for Medicare & Medicaid Services CY2024 ASC Final Rule: Addendum AA, BB,DD1.
- FY 2024 Hospital Inpatient Prospective Payment Rates (MS-DRG) obtained from CMS August 2023 Federal Register, CMS-1785-F and CMS-1788-F.