

Men's Health

US coding and payment reference - physician

This coding reference guide is intended to provide common coding and reimbursement information for male prosthetic, urology and related procedures.

The Medicare rates listed below are reflective of 2025 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.

2025 Physician procedural coding and payment reference

Effective January 1, 2025

CPT code	Code description	Physician payment	RVUs in facility
Erectile dysfunction treatment with inflatable penile prosthesis			
54405	Insertion of multi-component, inflatable penile prosthesis, including placement of pump, cylinders, and reservoir	\$786	24.30
54406	Removal of all components of a multi-component, inflatable penile prosthesis without replacement of prosthesis	\$713	22.03
54408	Repair of component(s) of a multi-component, inflatable penile prosthesis	\$771	23.83
54410	Removal and replacement of all component(s) of a multi component, inflatable penile prosthesis at the same operative session	\$840	25.98
54411	Removal and replacement of all components of a multi-component inflatable penile prosthesis through an infected field at the same operative session, including irrigation and debridement of infected tissue	\$1,000	30.91
Erectile dysfunction treatment with malleable penile prosthesis			
54400	Insertion of penile prosthesis; non-inflatable (semi-rigid)	\$520	16.06
54415	Removal of non-inflatable (semi-rigid) or inflatable (self-contained) penile prosthesis, without replacement of prosthesis	\$520	16.08
54416	Removal and replacement of non-inflatable (semi-rigid) or inflatable (self-contained) penile prosthesis at the same operative session	\$700	21.63
54417	Removal and replacement of non-inflatable (semi-rigid) or inflatable (self-contained) penile prosthesis through an infected field at the same operative session, including irrigation and debridement of infected tissue	\$874	27.03
Other penile restoration procedure codes			
54110	Excision of penile plaque (Peyronie's disease)	\$609	18.82
54111	Excision of penile plaque (Peyronie's disease); with graft up to 5 cm in length	\$777	24.01
54112	Excision of penile plaque (Peyronie's disease); with graft > 5 cm in length	\$910	28.14
54360	Plastic operation on penis to correct angulation	\$702	21.70
Testicular procedures			
54520	Orchiectomy, simple (including subcapsular), with or without testicular prosthesis, scrotal or inguinal approach	\$322	9.95
54522	Orchiectomy, partial	\$573	17.72
54530	Orchiectomy, radical, for tumor; inguinal approach	\$499	15.41
54660	Insertion of testicular prosthesis (separate procedure)	\$353	10.91
54690	Laparoscopy, surgical; orchiectomy	\$638	19.73
55175	Scrotoplasty; simple	\$359	11.09
55180	Scrotoplasty; complicated	\$672	20.77
Male incontinence treatment			
53440	Sling operation for correction of male urinary incontinence (e.g., fascia or synthetic)	\$732	22.64
53442	Removal or revision of sling for male incontinence (e.g., fascia or synthetic)	\$767	23.71

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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

- 2025 Current Procedural Terminology (CPT) Copyright 2024 American Medical Association. All rights reserved. CPT is a registered trademark of the American Medical Association.
- Physician payment rates are 2025 national averages. Source: Centers for Medicare & Medicaid Services CY2025 Physician Fee Schedule Final Rule: Addendum B.
- Medicare payment rates calculated using a conversion factor of 32.35 based on CY2025 Relative Value Units (RVU) information available as of January 2025.
- 2025 ICD-10-CM.
- 2025 HCPCS Level II Expert.
- Centers for Medicare & Medicaid Services CY2025 Hospital OPPS Final Rule: Addendum A, Addendum B.
- Centers for Medicare & Medicaid Services CY2025 ASC Final Rule: Addendum AA, BB, DD1.