

# 2020 Stone Management Coding and Payment Guide

This coding reference guide provides examples of common coding and payment for cystoscopic, ureteroscopic and percutaneous stone management procedures. The rates listed below are reflective of 2020 Medicare national average reimbursement rates and will vary due to geographic adjustment and other factors. These rates are subject to change without notice.

## Cystoscopic and Ureteroscopic Stone Management & Ureteral Stent Placement

Code	Description	APC	Hospital Outpatient	ASC	Physician (facility)	Physician (non-facility)	RVUs F - Facility O - Office
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	5373	\$1,771.55	\$789.71	\$215.09	\$913.07	5.96 - F 25.30 - O
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	5374	\$3,018.54	\$1,376.97	\$267.06	\$1,181.21	7.40 - F 32.73 - O
50605	Ureterotomy for insertion of indwelling stent, all types	N/A	INPATIENT ONLY PROCEDURE	INPATIENT ONLY	\$1,041.91	N/A	28.87 - F
50947	Laparoscopy, surgical; ureteroneocystostomy with cystoscopy and ureteral stent placement	5361	\$4,833.71	\$2,194.07	\$1,445.39	N/A	40.05 - F
51045	Cystotomy, with insertion of ureteral catheter or stent (separate procedure)	5373	\$1,771.55	\$789.71	\$520.77	N/A	14.43 - F
52320	Cystourethroscopy (including ureteral catheterization); with removal of ureteral calculus	5374	\$3,018.54	\$1,376.97	\$256.60	N/A	7.11 - F
52332	Cystourethroscopy, with insertion of indwelling ureteral stent (eg, Gibbons or double-J type)	5374	\$3,018.54	\$1,376.97	\$160.96	\$467.36	4.46 - F 12.95 - O
52352	Cystourethroscopy, with ureteroscopy and/or pyeloscopy; with removal or manipulation of calculus (ureteral catheterization is included)	5374	\$3,018.54	\$1,376.97	\$369.20	N/A	10.23 - F
52353	Cystourethroscopy, with ureteroscopy and/or pyeloscopy; with lithotripsy (ureteral catheterization is included)	5375	\$4,231.62	\$1,976.27	\$408.17	N/A	11.31 - F
52356	Cystourethroscopy, with ureteroscopy and/or pyeloscopy; with lithotripsy including insertion of indwelling ureteral stent (eg, Gibbons or double-J type)	5375	\$4,231.62	\$1,976.27	\$432.35	N/A	11.98 - F

### Ureteral Stent Removal

Code	Description	APC	Hospital Outpatient	ASC	Physician (facility)	Physician (non-facility)	RVUs F - Facility O - Office
52310	Cystourethroscopy, with removal of foreign body, calculus, or ureteral stent from urethra or bladder (separate procedure); simple	5373	\$1,771.55	\$789.71	\$156.99	\$298.10	4.35 - F 8.26 - O
52315	Cystourethroscopy, with removal of foreign body, calculus, or ureteral stent from urethra or bladder (separate procedure); complicated	5373	\$1,771.55	\$789.71	\$285.47	\$479.27	7.91 - F 13.28 - O

### Percutaneous Stone Management Rates

Code	Description	APC	Hospital Outpatient	ASC	Physician (facility)	Physician** (non-facility)	RVUs F - Facility O - Office
50080	Percutaneous nephrolithotomy or pyelostolithotomy, with or without dilation, endoscopy, lithotripsy, stenting, or basket extraction; up to 2 cm	5376	\$8,067.93	\$3,995.65	\$905.49	N/A	25.09 - F
50081	Percutaneous nephrolithotomy or pyelostolithotomy, with or without dilation, endoscopy, lithotripsy, stenting, or basket extraction; over 2 cm	5376	\$8,067.93	\$3,995.65	\$1,331.71	N/A	36.90 - F
50436	Dilation of existing tract, percutaneous, for an endourologic procedure incl. imaging guidance (eg. Ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation, w/post procedure tube placement, when performed	5373	\$1,771.55	\$789.71	\$156.99	N/A	4.35 - F
50437	Dilation of existing tract, percutaneous, for an endourologic procedure incl. imaging guidance (eg. Ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation, w/post procedure tube placement, when performed, including new access into the renal collecting system	5374	\$3,018.54	\$1,376.97	\$263.09	N/A	7.29 - F
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	5374	\$3,018.54	\$1,376.97	\$213.65	\$1,070.78	5.92 - F 29.67 - O
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	5374	\$3,018.54	\$1,376.97	\$280.78	\$1,189.15	7.78 - F 32.95 - O
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	5374	\$3,018.54	\$1,376.97	\$359.81	\$1,440.70	9.97 - F 39.92 - O

\*\* Per the CY2020 Physician Fee Schedule, "NA" means CMS has not developed a PE RVU in the non-facility setting for the service because it is typically furnished in the hospital. Individual Medicare Contractors determine whether or not these services can be furnished in the non-facility setting; if the contractor determines the service can be performed in the non-facility setting, the service will be paid at the facility PE RVU rate.

ICD-10 PCS Procedure Codes which may be associated with stone management procedures

Procedure Code	Code Description	Procedure Code	Code Description
0T9030Z	Drainage of Right Kidney with Drainage Device, Percutaneous Approach	0TC77ZZ	Extirpation of Matter from Left Ureter, Via Natural or Artificial Opening
0T9040Z	Drainage of Right Kidney with Drainage Device, Percutaneous Endoscopic Approach	0TC78ZZ	Extirpation of Matter from Left Ureter, Via Natural or Artificial Opening Endoscopic
0T9130Z	Drainage of Left Kidney with Drainage Device, Percutaneous Approach	0TCB7ZZ	Extirpation of Matter from Bladder, Via Natural or Artificial Opening
0T9140Z	Drainage of Left Kidney with Drainage Device, Percutaneous Endoscopic Approach	0TCB8ZZ	Extirpation of Matter from Bladder, Via Natural or Artificial Opening Endoscopic
0TC03ZZ	Extirpation of Matter from Right Kidney, Percutaneous Approach	0TF33ZZ	Fragmentation in Right Kidney Pelvis, Percutaneous Approach
0TC04ZZ	Extirpation of Matter from Right Kidney, Percutaneous Endoscopic Approach	0TF43ZZ	Fragmentation in Left Kidney Pelvis, Percutaneous Approach
0TC13ZZ	Extirpation of Matter from Left Kidney, Percutaneous Approach	0TF44ZZ	Fragmentation in Left Kidney Pelvis, Percutaneous Endoscopic Approach
0TC14ZZ	Extirpation of Matter from Left Kidney, Percutaneous Endoscopic Approach	0TF34ZZ	Fragmentation in Right Kidney Pelvis, Percutaneous Endoscopic Approach
0TC33ZZ	Extirpation of Matter from Right Kidney Pelvis, Percutaneous Approach	0TFB0ZZ	Fragmentation in Bladder, Open Approach
0TC34ZZ	Extirpation of Matter from Right Kidney Pelvis, Percutaneous Endoscopic Approach	0TFB3ZZ	Fragmentation in Bladder, Percutaneous Approach
0TC43ZZ	Extirpation of Matter from Left Kidney Pelvis, Percutaneous Approach	0TFB4ZZ	Fragmentation in Bladder, Percutaneous Endoscopic Approach
0TC44ZZ	Extirpation of Matter from Left Kidney Pelvis, Percutaneous Endoscopic Approach	0TFB7ZZ	Fragmentation in Bladder, Via Natural or Artificial Opening
0TC37ZZ	Extirpation of Matter from Right Kidney Pelvis, Via Natural or Artificial Opening	0TFB8ZZ	Fragmentation in Bladder, Via Natural or Artificial Opening Endoscopic
0TC38ZZ	Extirpation of Matter from Right Kidney Pelvis, Via Natural or Artificial Opening Endoscopic	0TFC0ZZ	Fragmentation in Bladder Neck, Open Approach
0TC47ZZ	Extirpation of Matter from Left Kidney Pelvis, Via Natural or Artificial Opening	0TFC3ZZ	Fragmentation in Bladder Neck, Percutaneous Approach
0TC48ZZ	Extirpation of Matter from Left Kidney Pelvis, Via Natural or Artificial Opening Endoscopic	0TFC4ZZ	Fragmentation in Bladder Neck, Percutaneous Endoscopic Approach
0TC67ZZ	Extirpation of Matter from Right Ureter, Via Natural or Artificial Opening	0TFC7ZZ	Fragmentation in Bladder Neck, Via Natural or Artificial Opening
0TC68ZZ	Extirpation of Matter from Right Ureter, Via Natural or Artificial Opening Endoscopic	0TFC8ZZ	Fragmentation in Bladder Neck, Via Natural or Artificial Opening Endoscopic

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- Centers for Medicare & Medicaid Services CY2020 Hospital OPPS Final Rule: Addendum B.
- Centers for Medicare & Medicaid Services CY2020 ASC Final Rule: Addendum AA.
- Centers for Medicare & Medicaid Services CY2020 Physician Fee Schedule Final Rule: Addendum A; National Average Medicare payment rates calculated using a conversion factor of \$36.0896 Based on CY2020. Relative Value Unites (RVU) information available as of 11.15.19.

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