

2017 Quick Code Guide

CPT CODE 53855

Insertion of a temporary prostatic urethral stent, including urethral measurement

Place of Service	CPT ¹ Code	RVU ²	Indications for Use
Physician Office (POS 11)	53855	22.09	The Spanner Prostatic Stent is intended for temporary use (up to 30 days) to maintain urine flow and allow voluntary urination in patients following minimally invasive treatment for benign prostatic hyperplasia (BPH) and after initial post-catheterization.

Commonly Billed Codes

Procedure	Procedure Code	Description
The Spanner Insertion	CPT Code 53855	Insertion of a temporary prostatic urethral stent, including urethral measurement
The Spanner Removal tether located manually	There is no CPT Code for stent removal by string.	
The Spanner Removal via Cystoscopy	CPT Code 52310	Cystourethroscopy, with removal of foreign body, calculus, or ureteral stent from urethra or bladder; (separate procedure) simple

It is appropriate to append the -58 Modifier to The Spanner insertion (53855) and removal via cystoscopy (52310) when The Spanner is planned for use during the global period of a minimally invasive therapy for BPH.

Please refer to the CPT manual and contact your Medicare Administrative Contractor for specific guidance.

Modifier 58 - Staged or Related Procedure or Service by the same physician during the postoperative period

This modifier is designed to indicate that the performance of a procedure during the postoperative period was planned for additional therapy following a surgical procedure or more extensive than the original procedure.

Commonly Billed Diagnosis Codes

Diagnosis Code	Description
N36.9	Urethral disorder, unspecified
N40.1	Enlarged prostate with lower urinary tract symptoms
N41.0	Acute prostatitis
N41.1	Chronic prostatitis
N41.8	Other inflammatory diseases of prostate
N42.3	Dysplasia of prostate
N42.9	Disorder of prostate, unspecified
R30.0	Dysuria
R33.9	Retention of urine, unspecified
R39.14	Feeling of incomplete bladder emptying
R33.8	Other retention of urine
R35.0	Frequency of micturition
R35.8	Other polyuria
R35.1	Nocturia
R39.12	Poor urinary stream
R39.15	Urgency of urination
R39.16	Straining to void

ICD-10-CM diagnosis codes are used by physicians and hospitals to report patient health-related conditions and disease classifications.

This is not a complete list of diagnosis codes; please refer to the current ICD-10-CM coding manual for specific guidance.

Outpatient Hospital

C-Code	Description
C2625	Stent, non-coronary, temporary, with delivery system

Payment (National Medicare Average)

2017 Medicare Reimbursement For Insertion And Removal Of A Temporary Prostatic Urethral Stent

CPT Code	Outpatient Hospital (POS 22)		ASC (POS 24)	Physician Services	Physician Office (POS 11)
	APC	Facility Fee (National Medicare Avg) ³	Facility Fee (National Medicare Avg) ⁴	Fee for services provided in the Outpatient Hospital or ASC (National Medicare Avg) ⁵	Fee for services provided in the Office (National Medicare Avg) ⁵
53855	5373	\$1,643.96	\$727.46	\$85.77	\$792.78
52310	5373	\$1,643.96	\$791.63	\$157.55	\$249.43

¹ CPT is a registered trademark of the American Medical Association.

² <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/PFS-Relative-Value-Files.html> Select current Physician Fee Schedule Relative Value file

³ 2017 Medicare Hospital Outpatient Perspective Payment System <http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalOutpatientPPS/index.html>

⁴ 2017 Ambulatory Surgical Center (ASC) Payment <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-payment/ASCPayment/index.html>

⁵ 2017 Medicare Physician Fee Schedule <http://www.cms.gov/apps/physician-fee-schedule/>

Disclaimer

The reimbursement information provided is gathered from third-party sources and is intended to provide general information for reference purposes only. As such, SRS Medical makes no guarantee of coverage or payment. Reimbursement policies change frequently and can vary considerably from one insurer to another. SRS strongly recommends that you consult your payers for interpretation of local coverage and reimbursement policies. Every reasonable effort has been made to ensure the accuracy of this information, however, the ultimate responsibility for coding and claims submission lies with the physician, clinician, hospital or other facility.

The Spanner® and Surveyor® are registered trademarks of SRS Medical. © 2017 SRS Medical. All rights reserved.

SRS Medical Systems, Inc. Reimbursement Department 1-866-850-7607