

2010 Rectocele Reimbursement Fact Sheet

SURGEON CPT CODE ¹	PROCEDURE	NATIONAL AVERAGE MEDICARE PAYMENT ²
45560	Repair of rectocele (separate procedure)	\$687
57250	Posterior colporrhaphy, repair of rectocele with or without perineorrhaphy	666
57268	Repair of enterocele, vaginal approach (separate procedure)	480
57270	Repair of enterocele, abdominal approach (separate procedure)	799

OUTPATIENT FACILITY

Hospital Outpatient Department

APC	APC DESCRIPTION	MEDICARE PAYMENT ³
0150	Level IV Anal Rectal Procedure (CPT code: 45560)	\$2,164
0195	Level VII Female Reproductive Procedure (CPT codes: 57250, 57268)	2,371

Freestanding Ambulatory Surgery Center

CPT CODE	DESCRIPTION	MEDICARE PAYMENT ⁴
45560	Repair of Rectocele	\$1,072
57268	Repair of Bowel Bulge	1,180
57250	Repair Rectum and Vagina	1,230

INPATIENT FACILITY

ICD-9 CODE ⁵	DESCRIPTION
70.52	Repair, rectocele
70.92	Other operations, vaginal and cul-de-sac, other

NOTE: ICD-9 codes are grouped into Diagnoses Related Groups (DRGs) for Medicare reimbursement using a patient's diagnoses, procedures performed, age, sex and discharge status. One DRG is assigned to each inpatient stay.

DRG	DESCRIPTION	AVERAGE LENGTH OF STAY (DAYS) ⁶	NATIONAL AVERAGE DRG PAYMENT ⁶
329	Major small & large bowel procedures with MCC	15.7	\$29,006
330	Major small & large bowel procedures with CC	9.2	14,098
331	Major small & large bowel procedures without CC/MCC	5.5	9,002
746	Vagina, cervix & vulva procedures with CC/MCC	4.0	6,914
747	Vagina, cervix & vulva procedures without CC/MCC	1.8	4,781
748	Female reproductive system reconstructive procedures	1.7	4,958

¹ All Current Procedural Terminology (CPT) five-digit numeric codes, descriptions, numeric modifiers, instructions, guidelines, and other material are copyright 2009 American Medical Association. All Rights Reserved.

² Federal Register, Vol. 74, No. 226, Wednesday, November 25, 2009/ Rules and Regulations. The 2010 Physician Reimbursement Conversion Factor = \$36.8729; Federal Register.

³ Federal Register, Vol. 74, No. 223, Friday, November 20, 2009/ Rules and Regulations; Hospital Outpatient Payment.

⁴ Federal Register, Vol. 74, No. 223, Friday, November 20, 2009/ Rules and Regulations; ASC Reimbursement.

⁵ Hospital ICD-9-CM 2010 Volumes 1, 2 & 3, 9th Revision-Clinical Modification, American Medical Association. Copyright © 2009 Saunders, an imprint of Elsevier, Inc.

⁶ Federal Register, Vol. 74, No. 165, Thursday, August 27, 2009/ Rules and Regulations; National Average DRG Payment.

Physicians should refer to their provider Carrier Manual for their geographic payments.

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