Removed Sections

Key Artifacts

- Investment Heat Map
- Revenue Heat Map
- Patent Heat Map
- Dynamic Patent Dashboard
- Taxonomy Sample
- Patent Search Strategy
- Clinical Timeline Visualization
- Patent Product Mapping
- Stent Landscape-Flash
- Company Profile - Flash

Technological insights

The ideal ureteric stent biomaterial is yet to be discovered. Ongoing research with respect to material modifications and stent designs has achieved better patient comfort, and decreased stent-related complications. Drug-eluting stent technology is an interesting development which may prevent infection, encrustation and other stent related symptoms.

Reimbursements

2011 MEDICARE REIMBURSEMENT FOR URETERAL STENT PLACEMENT OR REMOVAL - PHYSICIAN AND OUTPATIENT FACILITY

Ambulatory Surgery Center					*Outpatient Facility*	*Physician Services*
CPT Code	Procedure Description	Facility Payment[1]	APC	Facility Fee Schedule (National Medicare Avg)2	Fee When Services Are Provided in the Hospital or ASC (National Medicare Avg)3	Fee When Services Are Provided in the Office (National Medicare Avg)4
50393	Introduction of ureteral catheter or stent into ureter through renal pelvis for drainage and/or injection, percutaneous	$1,020.24	0162	$1,813.74	$224.92	N/A*
50605	Ureterotomy for insertion of indwelling stent, all types	Procedure not permitted in outpatient setting			$982.60	N/A*
50947	Laparoscopy, surgical; ureteroneocystostomy with cystoscopy and ureteral stent placement	$1,853.68	0131	$3,295.39	$1,424.97	N/A*
51045	Cystotomy, with insertion of ureteral catheter or stent (separate procedure)	$288.27	0160	$512.48	$500.13	N/A*
52310	Cystourethroscopy, with removal of foreign body, calculus, or ureteral stent from urethra or bladder (separate procedure); simple	$680.87	0161	$1,210.41	$157.65	$253.80
52315	Cystourethroscopy, with removal of foreign body, calculus, or ureteral stent from urethra or bladder (separate procedure); complicated	$1,020.24	0162	$1,813.74	$284.72	$444.41
52332	Cystourethroscopy, with insertion of indwelling ureteral stent (eg, Gibbons or double-J type)	$1,020.24	0162	$1,813.74	$151.87	$501.15
74480	Introduction of ureteral catheter or stent into ureter through renal pelvis for drainage and/or injection, percutaneous, radiological supervision and interpretation	Imaging is included in allowance for ureteral stent placement or removal			$27.18	$112.80
76942	Ultrasonic guidance for needle placement (eg, biopsy, aspiration, injection, localization device), imaging supervision and interpretation	Imaging is included in allowance for ureteral stent placement or removal			$33.64	$198.08
77002	Fluoroscopic guidance for needle placement (eg, biopsy, aspiration, injection, localization device)	Imaging is included in allowance for ureteral stent placement or removal			$27.52	$75.77
77012	Computed tomography guidance for needle placement (eg, biopsy, aspiration, injection, localization device), radiological supervision and interpretation	Imaging is included in allowance for ureteral stent placement or removal			$57.08	$163.77

1. 2011 Medicare Ambulatory Surgery Center Fee Schedule
2. 2011 Medicare Hospital Outpatient Prospective Payment System Fee Schedule
3. 2011 Medicare Physician Fee Schedule

N/A* Medicare has not developed a rate for the in-office setting as these procedures are typically performed in a hospital setting. Physicians should contact the Medicare contractor to determine if the service can be performed in-office. If the contractor determines the service or procedure may be performed in-office, the physician will receive Medicare?s physician fee schedule amount for procedures performed in the hospital/ASC.

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2 "Allowed Amount" is the amount Medicare determines to be the maximum allowance for any Medicare covered procedure. Actual payment will vary based on the maximum allowance less any applicable deductibles, co-insurance, etc.

[3] The hospital outpatient payment rates are 2011 Medicare national averages. Source: November 2, 2010 Federal Register, CMS-1504-FC.

[4] The ASC payments rates are 2011 Medicare national averages. ASC rates are from the 2011 Ambulatory Surgical Center Covered Procedures List ? Addendum AA. Source: November 2, 2010 Federal Register, CMS-1504-FC.