



The Continence Company

**NEEDLELESS®** Single Incision TOT System  
**KIM®** Knotless Incontinence System  
**TRT®** Female Remeex Adjustable Continence System  
**MRS®** Male Remeex Adjustable Continence System  
**Anchorsure®** Transvaginal Sacrospinous Fixation System

### 2016 Most Commonly Billed Codes

#### Female urinary incontinence and prolapse - sling procedures:

CPT Code	Description	Medicare Physician Reimbursement Rate	Hospital Outpatient Allowed Amount	ASC Allowed Amount
57288	Sling operation for stress incontinence (e.g. fascia or synthetic)	\$728	\$3,660	\$1,810
57287	Removal or revision of sling for stress urinary incontinence (eg. fascia or synthetic)	\$692	\$1,861	\$1,041
45560	Repair of rectocele (separate procedure)	\$710	\$2,600	\$1,426
57240	Anterior colporrhaphy, repair of cystocele with or without repair of urethrocele	\$682	\$3,978	\$1,813
57250	Posterior colporrhaphy, repair of cystocele with or without perineorrhaphy	\$686	\$3,978	\$1,813
57260	Combined anterior/posterior colporrhaphy	\$847	\$3,978	\$1,813
57265	Combines anterior/posterior colporrhaphy; with enterocele repair	\$927	\$3,978	\$1,813
57267	Insertion of mesh or other prosthesis for repair of pelvic floor defect, each site (anterior, posterior compartment), vaginal approach with or without perineorrhaphy	\$261	\$0	\$0
57268	Repair of enterocele, vaginal approach (separate procedure)	\$429	\$1,845	\$1,012
57280	Colpopexy, abdominal approach	\$971	N/A	N/A
57282	Colpopexy, vaginal; extra-peritoneal approach (sacrospinous, iliococcygeus)	\$509	\$3,978	N/A
57284	Paravaginal defect repair (including repair of cystocele, stress urinary incontinence, and/or incomplete vaginal prolapse)	\$828	\$3,978	N/A
57285	Paravaginal defect repair (including repair of cystocele, if performed) vaginal approach	\$683	\$3,978	N/A
57295	Revision (including removal) of prosthetic vaginal graft; vaginal approach	\$485	\$1,845	\$1,012
57425	Laparoscopy, surgical, colpopexy (suspension of vaginal apex)	\$986	\$3,980	N/A
57426	Revision (including removal) of prosthetic vaginal graft, laparoscopic approach	\$857	\$3,978	\$1,813
58999	Unlisted procedure, female genital system (nonobstetrical)	N/A	\$131	N/A

Staged or Related Procedure or Service by the Same Physician or Other Qualified Health Care Professional During the Postoperative Period: It may be necessary to indicate that the performance of a procedure or service during the postoperative period was (a) planned or anticipated (staged); (b) more extensive than the original procedure; or (c) for therapy following a surgical procedure. This circumstance may be reported by adding modifier 58 to the staged or related procedure. Note: For treatment of a problem that requires a return to the operating/procedure room (eg. unanticipated clinical condition), see modifier 78.

#### Modifier 58

#### ICD-9-CM Diagnostic Coding Options

Code	Description
599.81	Urethral hypermobility
599.82	Intrinsic (urethral) sphincter deficiency (ISD)
618.00	Unspecified prolapse of vaginal walls
618.01	Prolapse of vaginal walls, without mention of uterine prolapse, cystocele, midline
618.02	Prolapse of vaginal walls, without mention of uterine prolapse, cystocele, lateral
618.03	Urethrocele
618.04	Prolapse of vaginal walls, without mention of uterine prolapse, rectocele
618.50	Prolapse of vaginal vault after hysterectomy
618.06	Vaginal enterocele, congenital or acquired
618.81	Incompetence or weakening of pubocervical tissue
618.82	Incompetence or weakening of rectovaginal tissue
618.89	Other specified genital prolapse
629.31	Erosion of implanted vaginal mesh and other prosthetic materials to surrounding organ or tissue
629.32	Exposure of implanted vaginal mesh or other prosthetic materials into vagina
618.09	Other prolapse of vaginal walls without mention of uterine prolapse
625.60	Female stress incontinence
788.30	Urinary incontinence, unspecified
788.37	Continuous leakage
996.39	Mechanical complication of genitourinary device, implant and graft
996.76	Other complications due to genitourinary device, implant and graft

#### ICD-9-CM Procedural Coding Options

Code	Description
59.40	Suprapubic sling operation
59.71	Levator muscle operation for urethrovesical suspension
59.79	Other repair of urinary stress incontinence
70.50	Repair of cystocele and rectocele
70.51	Repair of cystocele
70.52	Repair of cyctocele—posterior colporrhaphy
70.53	Repair of cyctocele and rectocele with graft or prosthesis
70.54	Repair of cyctocele with graft or prosthesis
70.55	Repair of rectocele with graft or prosthesis
70.63	Vaginal construction with graft or prosthesis
70.64	Vaginal reconstruction with graft or prosthesis
70.77	Vaginal suspension and fixation
70.78	Vaginal suspension and fixation with graft or prosthesis
70.79	Other repair of vagina
70.93	Other operations on cul-de-sac with graft or prosthesis
70.94	Insertion of biological graft
70.95	Insertion of synthetic graft or prosthesis

#### HCPCS Code

L8699 Prosthetic implant, not otherwise specified

#### C-Code

C1771 Repair device, urinary, incontinence, with sling graft  
 C1763 Connective tissue, non-human (includes synthetic)  
 C1781 Mesh (implantable)  
 C1762 Connective tissue, human (includes fascia lata)  
 C2631 Repair device, urinary, incontinence, without sling graft

#### Disclaimer:

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2016 Most Commonly Billed Codes

Male urinary incontinene - sling procedure:

CPT Code	Description	Medicare Physician Reimbursement Rate	Hospital Outpatient Allowed Amount	ASC Allowed Amount
53440	Sling operation for correction of male urinary incontinence (eg, fascia or synthetic)	\$771	\$6,822	\$6,627
53442	Removal or revision of sling for male urinary	\$802	\$2,509	\$1,376

ICD-9-CM Diagnostic Coding Options

ICD-9-CM Procedural Coding Options

Code	Description	Code	Description
599.82	Intrinsic (urethral) sphincter deficiency (ISD)	57.99	Other operations on bladder
788.30	Urinary incontinence, unspecified		
788.32	Stress incontinence, male		
788.37	Continuous leakage		

MS-DRGs

Code	Description	Hospital Allowed Amount	Inpatient Allowed Amount
662	Minor bladder Procedures w/MCC	\$17,063	
663	Minor bladder Procedures w/CC	\$9,833	
664	Minor bladder Procedures w/o CC/MCC	\$7,668	
748	Female Reproductive System Reconstructive Procedures	\$6,361	
329	Major Small and Large bowel procedures w/MCC	\$29,820	
330	Major Small and Large bowel procedures w/CC	\$14,970	
331	Major Small and Large bowel procedures w/o CC/MCC	\$9,737	
653	Major Bladder Procedures w/MCC	\$34,038	
654	Major Bladder Procedures w/CC	\$18,190	
655	Major Bladder Procedures w/o CC/MCC	\$13,267	
662	Minor Bladder Procedures w/MCC	\$17,621	
663	Minor Bladder Procedures w/CC	\$8,965	
664	Minor Bladder Procedures w/o CC/MCC	\$7,277	

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