

## Impact on highly utilized codes

Procedure Code	Description	Current MMIS Payment Flag	Current Rate for Outpatient Surgery, Hospital Based (Provider Type 10)	Current Rate for Freestanding Ambulatory Surgical Centers (Provider Type 46)	2016 CMS Ambulatory Payment Classification (APC)	Proposed NV Rate	Comparison of Proposed Rate and Current PT 10 Rate	Comparison of Proposed Rate and Current PT 46 Rate
43239	Biopsy of the esophagus, stomach, and/or upper small bowel using an endoscope	AS2	\$669.00	\$535.20	5301	\$ 329.44	(\$339.56)	(\$205.76)
67311	Realignment of the eye with repair of one horizontal eye muscle	AS3	\$765.00	\$612.00	5312	\$ 619.30	(\$145.70)	\$7.30
11042	Removal of skin and tissue first 20 sq cm or less	AS2	\$669.00	\$535.20	5052	\$ 99.69	(\$569.31)	(\$435.51)
45380	Biopsy of large bowel using an endoscope	AS2	\$669.00	\$535.20	5312	\$ 332.71	(\$336.29)	(\$202.49)
54161	Removal of foreskin, patient older than 28 days of age	AS2	\$669.00	\$535.20	5373	\$ 665.82	(\$3.18)	\$130.62
41899	Dental surgery procedure	AS7	\$1,492.50	\$1,194.00	5161	\$ 595.75	(\$896.75)	(\$598.25)
69930	Implantation of cochlear device	ASF	\$19,426.50	\$19,426.50	5166	\$ 22,342.35	\$2,915.85	\$2,915.85
45378	Diagnostic examination of large bowel using an endoscope	AS2	\$669.00	\$535.20	5312	\$ 332.71	(\$336.29)	(\$202.49)
44970	Removal of appendix using an endoscope	AS1	\$499.50	\$399.60	5361	\$ 2,842.55	\$2,343.05	\$2,442.95
42820	Removal of tonsils and adenoid glands patient younger than age 12	AS3	\$765.00	\$612.00	5164	\$ 714.65	(\$50.35)	\$102.65
47562	Removal of gallbladder using an endoscope	AS3	\$765.00	\$612.00	5361	\$ 1,589.52	\$824.52	\$977.52
69436	Incision of eardrum with insertion of eardrum tube under general anesthesia	AS3	\$765.00	\$612.00	5164	\$ 714.65	(\$50.35)	\$102.65