

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.

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.