

The purpose of the Procedure Price Lookup website is to facilitate price transparency with respect to the estimated costs of medical services provided in ambulatory surgical centers and hospital outpatient departments that participate in the Medicare Program. This website estimates the total amount Medicare pays, as well as the beneficiary copay, for a selected procedure based on the average cost to Medicare at similar facilities across the nation. However, the actual copayment may vary depending on geographic location. For instance, the total amount Medicare pays to the provider may be higher at metropolitan areas because Medicare may adjust the base payment rate up or down, according to the geographic location in which medical services are furnished. As a result, a beneficiary copayment may be higher than the estimated copay provided by the tool. The beneficiary copayment for many OPPS services and most ASC services is 20 percent of the total Medicare approved amount.

The Procedure Price Lookup comparison file that we are making available contains the payment and copayment comparison data underpinning the website. The source data was organized using the payment addenda associated with the OPPS and ASC systems, which are updated on a quarterly basis. This comparison file excludes codes for which separate payment is only made in one of the payment systems, codes which do not receive separate payment in either payment system, as well as drug codes which receive the same payment in both systems.

We note that there are various potential reasons for differences between OPPS and ASC payments/copayments. Among these are differences in payment policy, the relative weights used in developing the payments, the conditions of participation associated with each facility type, and resource costs between the systems. In addition, there are differences in the requirements under statute, such as the service level cap on OPPS copayment at the inpatient deductible.