Medicare Reimbursement Trends Across Benign Urology Subspecialties from 2002 to 2025

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Background

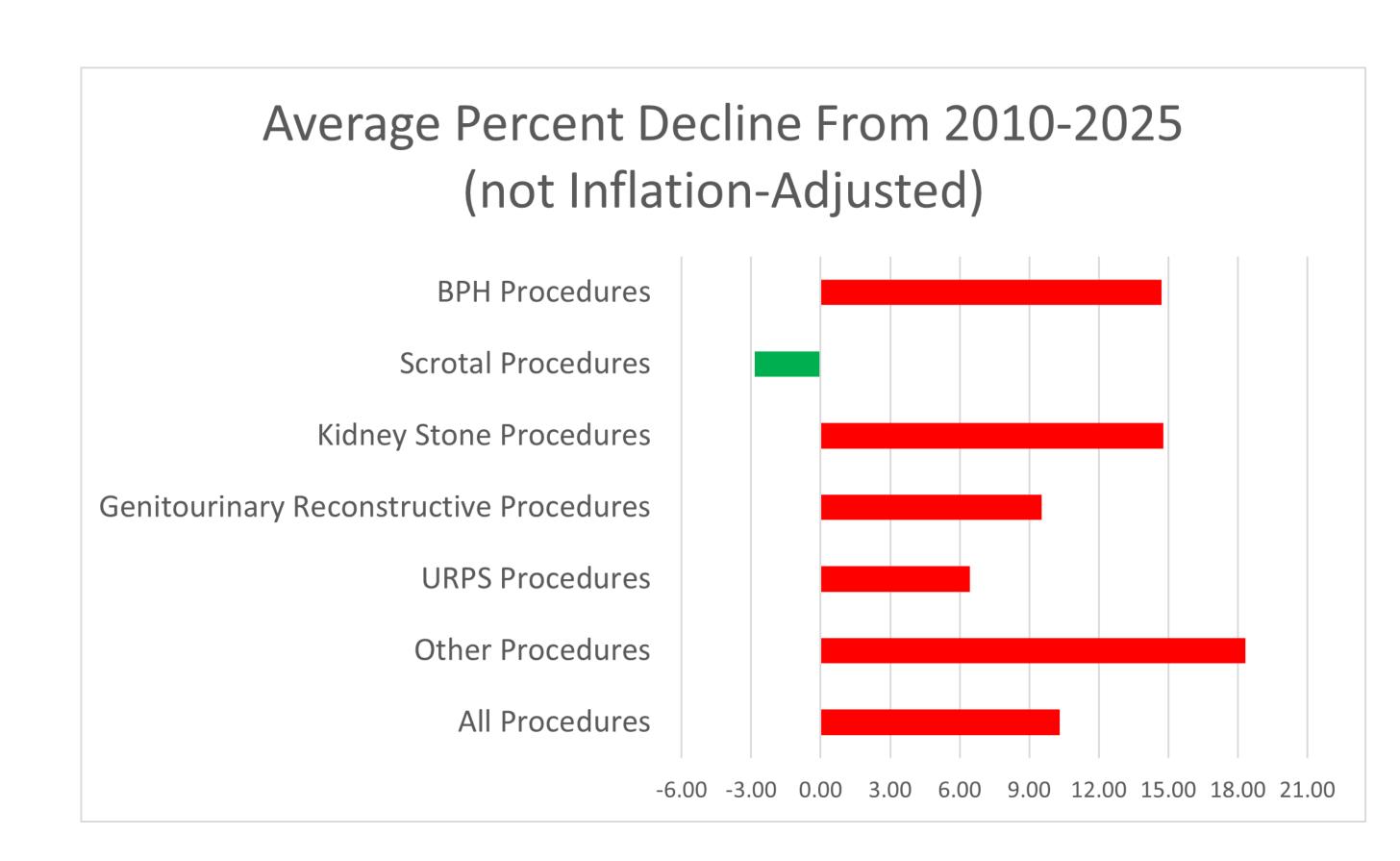
- Physician reimbursement for Medicare patients has steadily declined
- These trends threaten practice sustainability and limit patient access to care.
- Goal: Provide specialty-specific data to inform policymakers and support advocacy efforts within urology.

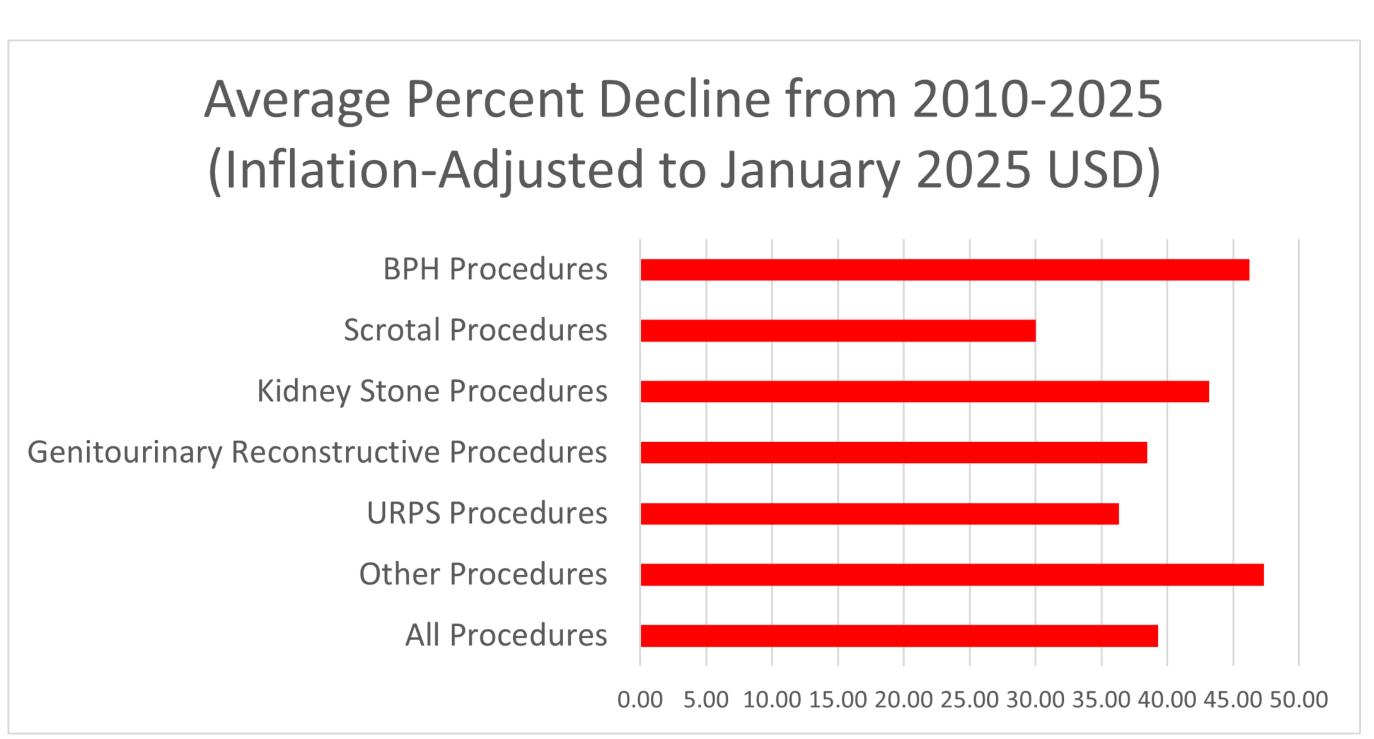
Methods

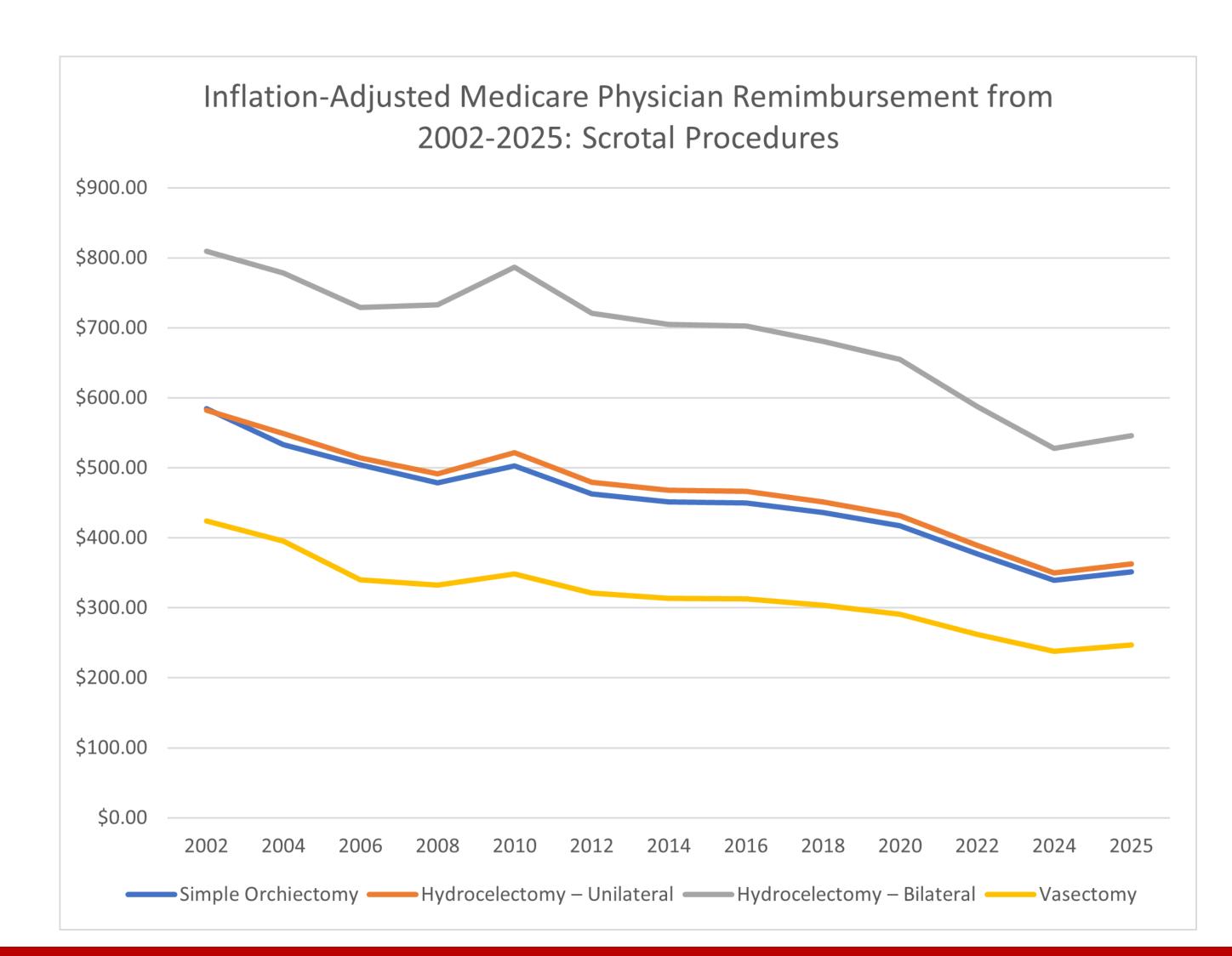
- Data Source: CMS Physician Fee Schedule Look-Up Tool (2002–2025).
- 29 common benign urology procedures.
- Reimbursement defined as the **Medicare facility** price.
- All payments converted to 2025 USD using the Consumer Price Index (CPI).
- Trends described over time.
- Compound Annual Growth Rates (CAGR)
 calculated for 2002–2025 and 2010–2025.

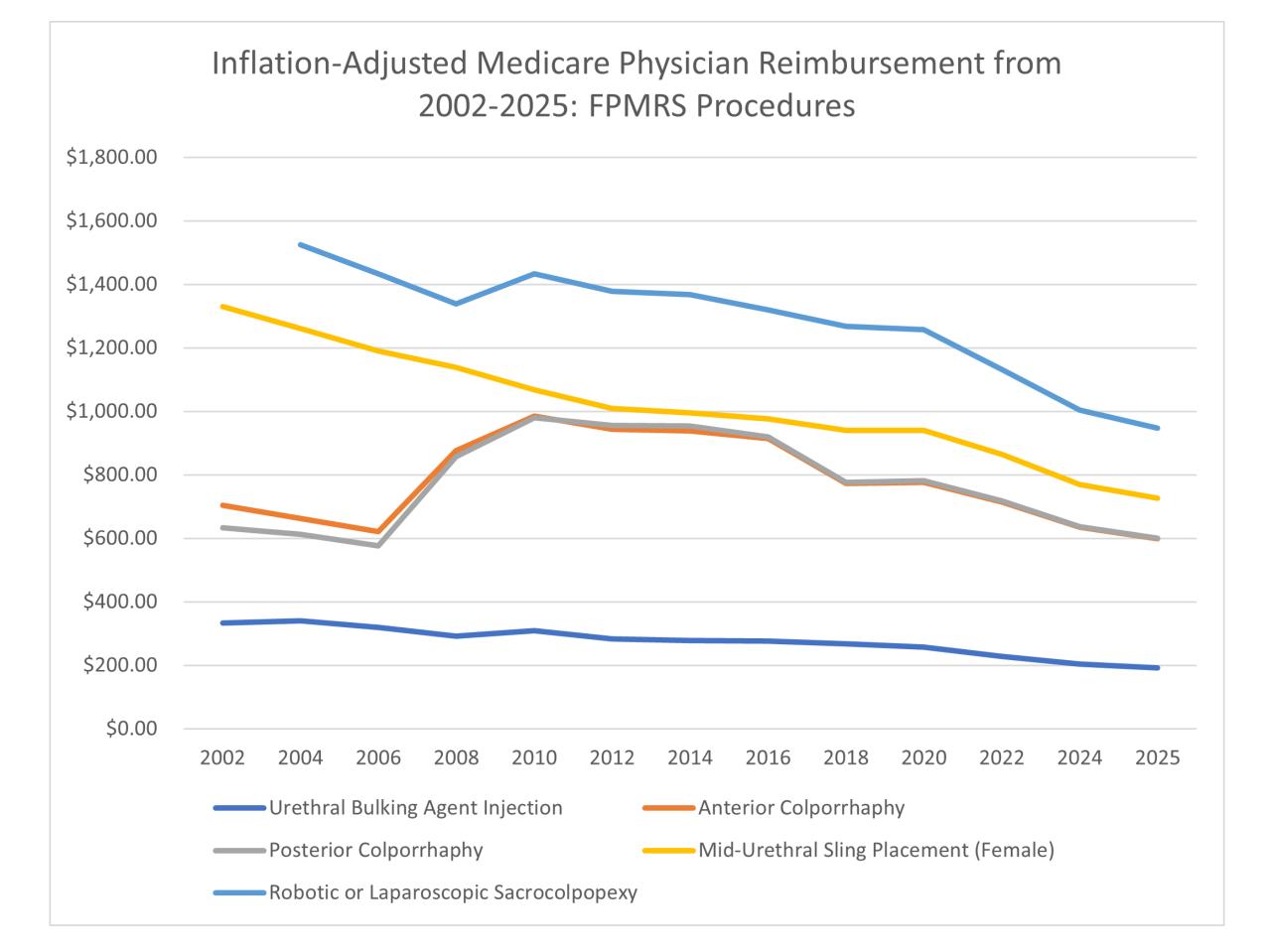
Results

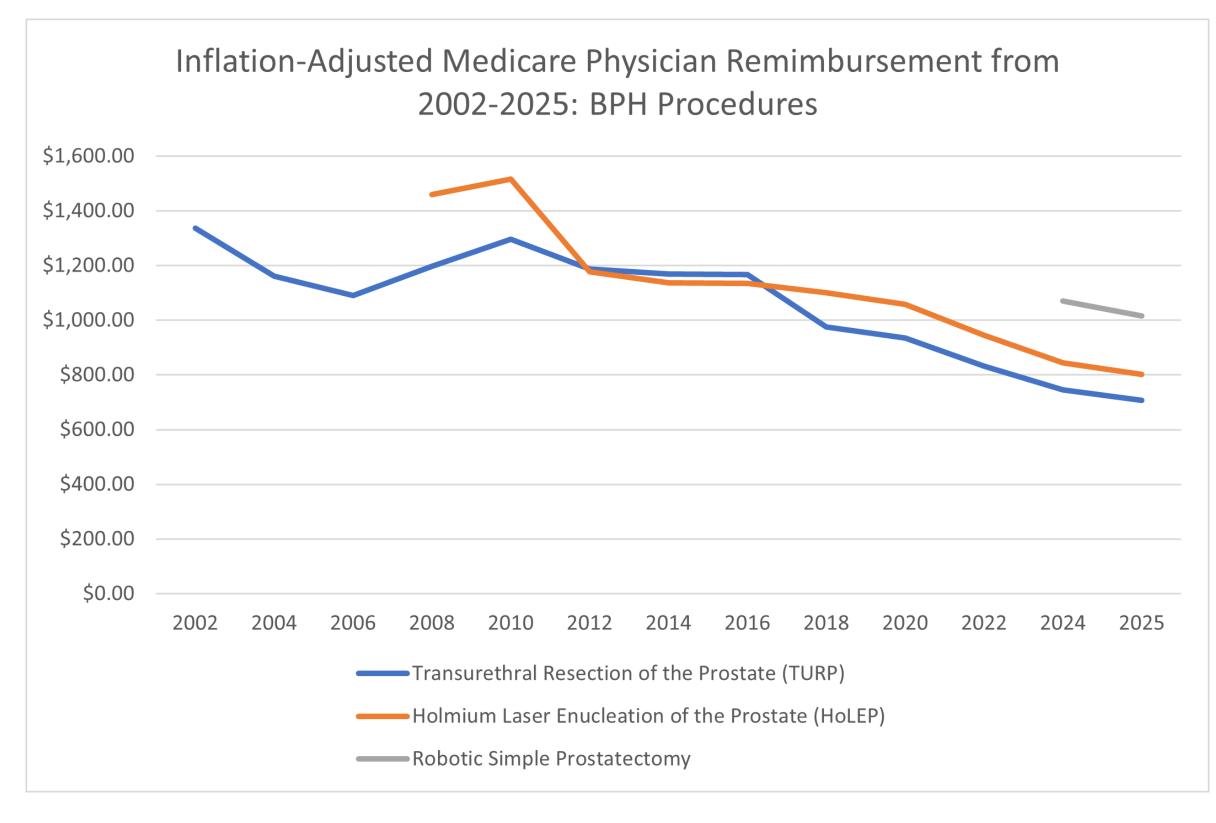
- Average reimbursement decreased by 41.6% (inflation-adjusted)
- Average CAGR (Figures 1 and 2):
 - 2002–2025: –0.06% nominal (**–2.55%** inflation-adjusted)
 - 2010–2025: –0.87% nominal (**–3.43%** inflation-adjusted)
- Consistent inflation-adjusted decline in reimbursement across all procedural categories (Figures 3,4, & 5, selected line graphs displayed)











Conclusions

- Medicare reimbursement for benign urology procedures has declined substantially since 2002.
- These declines jeopardize practice sustainability and reduce patient access to care.
- Sustained advocacy and permanent policy reform are critical to preserve the viability of diverse urology practice settings.