#195 Michael Huaman

A Comparison of Price Differences in Cystoscopic and Ureteroscopic Urologic Procedures Between New York, New Jersey and Pennsylvania

Introduction: In January 2021, hospitals around the country were required to make their chargemaster publicly accessible, including pricing information on common urologic procedures such as cystoscopy and ureteroscopy. The purpose of this study was to assess cost variance in cystoscopy and ureteroscopy across hospitals in the northeastern tristate region of the United States. Methods: Hospitals from New York, New Jersey, and Pennsylvania were selected to locate price transparency information for cystoscopy and ureteroscopy. These hospitals were searched on Google with the search terms "hospital name" + "price transparency" or "hospital name" + "chargemaster." The chargemaster (if available) was downloaded and gross and Medicare prices were recorded for each CPT code that corresponded to cystoscopy and ureteroscopy. Availability of CPT code prices and prices for each CPT code were compared between hospitals using chi squared and the Kruskal-Wallis test, respectively. Results: A total of 386 hospitals were included in the study, 196 in PA, 123 in NY, 67 in NJ. In an analysis of cost prices, a higher percentage of NY hospitals reported prices for CPT codes 52005 compared to PA and NJ (NY=46.5% vs PA=31.2% vs NJ=9.3%, p<0.0001), 52310 (NY=45.6% vs PA=27.3% vs NJ 3.8%, p<0.0001) and 52332 (NY 38.1% vs PA=21.4% vs NJ=18.5%, p=0.003). Median Medicare prices in NY were higher compared to hospitals in NJ and PA for codes 52005 (NY= \$5227.00, vs NJ=\$143.60 vs PA=\$1670.00, p=0.005), 52310 (NY=\$4552.70 vs NJ=\$165.00 vs PA=\$1739.80, p=0.008) and 52356

(NY=\$12398.20 vs NJ=\$2706.50 vs PA=\$3996.80, p=0.0004).

Conclusion: Data collected from hospitals that offer urological services across three northeastern states indicate that there is significant variance in hospitals reporting prices and making their chargemasters available. These findings highlight the importance of chargemasters, and the difficulty patients face in making financial decisions about where to seek care.