

# Neurosurgery

Schedule of Benefits  
for Professional Fees

## ARTERIES/ VEINS

Code	Description	Payable with Private Rooms Technical Fee Benefit	Pre-Approval Required	Payment Indicators	Payment Rules
5290	Clipping aneurysm, anterior circulation (open procedure)		No		
5292	Detachable balloon occlusion of carotico cavernous aneurysms and fistulae		No		
5713	Contra-lateral carotid and vertebral angiography performed at the same session as procedure codes 5711 or 5712 above (benefit shown is payable in full with the code for the main procedure)		No		Benefit shown is payable in full with the code for the main procedure.
5779	Arteriovenous malformation, simple (< Spetzler 3)		No		
5781	Arteriovenous malformation, complex (> Spetzler 3)		No		
5782	Dural arteriovenous malformation		No		
5783	Clipping aneurysm, posterior circulation (open procedure)		No		
5784	Anastomosis, arterial, extracranial-intracranial (e.g. middle cerebral/ cortical) arteries		No		

## BURR HOLE

Code	Description	Payable with Private Rooms Technical Fee Benefit	Pre-Approval Required	Payment Indicators	Payment Rules
5490	Burr hole for excavation and/ or drainage of subdural haematoma		No		
5645	Burr hole(s) for brain biopsy/ abscess tapping		No	Diagnostic	
5650	Burr hole for ventricular puncture or intensive care monitoring (I.P.)		No	Independent Procedure	
5706	Twist drill, burr hole, craniotomy or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (e.g. thalamus, globus pallidus, subthalamic, nucleus, periventricular, periaqueductal gray), without use of intraoperative microelectrode recording		No		
5707	Twist drill, burr hole, craniotomy or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (e.g. thalamus, globus pallidus, subthalamic, nucleus, periventricular, periaqueductal gray), with use of intraoperative microelectrode recording		No		
5744	Burr hole(s) for brain biopsy/ abscess tapping/ implanting ventricular catheter, reservoir, EEG electrode(s) or pressure recording device		No		

## CO-SURGERY

Code	Description	Payable with Private Rooms Technical Fee Benefit	Pre-Approval Required	Payment Indicators	Payment Rules
5691	Consultant plastic surgeon, cranio facialplasty, including the correction of craniosynostoses and facial synostoses		No		
5692	Consultant neurosurgeon, neurosurgical involvement with cranio facialplasty		No		
647010	Co-surgery benefit for two surgeons who perform neuroendoscopy, intracranial; with excision of pituitary tumour, transnasal or transsphenoidal approach (I.P.) - Neurosurgeons benefit		No	Independent procedure	Claimable by second surgeon assisting in procedure.
647011	Co-surgery benefit for two surgeons who perform spinal surgery (I.P.) - ENT Surgeons benefit		Yes	Independent procedure	Claimable by second surgeon assisting in procedure.

## CRANIECTOMY/ CRANIOTOMY

Code	Description	Payable with Private Rooms Technical Fee Benefit	Pre-Approval Required	Payment Indicators	Payment Rules
5295	Craniectomy or craniotomy for cerebellar haematoma		No		
5320	Craniectomy for excision of brain tumour, supratentorial		No		
5365	Craniectomy for meningioma, supratentorial		No		
5376	Craniotomy for excision epileptic focus		No		
5377	Craniotomy for lobectomy (epilepsy) with electrocorticography during surgery (includes removal of electrode array)		No		
5378	Craniotomy with elevation of bone flap (for intractable epileptic seizures); for lobectomy, temporal, temporal lobe, without electrocorticography during surgery		No		
5379	Craniotomy with elevation of bone flap (to treat intractable mesial temporal lobe epilepsy); for selective amygdalohippocampectomy		No		
5410	Craniectomy or craniotomy for intracerebral haematoma		No		
5420	Craniectomy or craniotomy for abscess		No		
5470	Craniotomy for removal of pituitary tumour or to resect a portion of gland		No		
5747	Craniectomy or craniotomy, exploratory, supratentorial (I.P.)		No	Independent Procedure	
5748	Craniectomy or craniotomy, exploratory, infratentorial (I.P.)		No	Independent Procedure	

## CRANIECTOMY/ CRANIOTOMY

Code	Description	Payable with Private Rooms Technical Fee Benefit	Pre-Approval Required	Payment Indicators	Payment Rules
5749	Craniectomy or craniotomy for extra/ subdural haematoma		No		
5751	Craniectomy for foramen magnum decompression (A-C; syringo)		No		
5752	Craniectomy for nerve section/ decompression		No		
5753	Craniectomy for bone tumour, supratentorial		No		
5754	Craniectomy for excision of brain tumour, infratentorial		No		
5757	Craniectomy for meningioma, infratentorial		No		
5758	Craniectomy for cerebellopontine angle tumour (includes acoustic neuroma)		No		
5759	Craniectomy for midline skull base tumour		No		
5764	Craniotomy with elevation of bone flap; for subdural implantation of an electrode array, for long term seizure monitoring		No		
5766	Craniotomy with elevation of bone flap; for removal of epidural or subdural electrode array, without excision of cerebral tissue		No		
5767	Craniotomy for transection of corpus callosum		No		
5768	Craniectomy for excision/ fenestration cyst		No		
5769	Craniotomy for excision of craniopharyngioma (complete removal)		No		
5774	Craniectomy for repair of skull base, encephalocele		No		
5776	Craniofacial approach to anterior cranial fossa; intradural, including unilateral or bifrontal craniotomy, elevation or resection of frontal lobe, osteotomy of base of anterior cranial fossa		No		

## OTHER NEUROSURGICAL PROCEDURES

Code	Description	Payable with Private Rooms Technical Fee Benefit	Pre-Approval Required	Payment Indicators	Payment Rules
5325	Penetrating brain injury with removal of foreign body		No		
5370	CSF leak repair via craniectomy or nasal endoscopy (I.P.)		No	Independent Procedure	

## OTHER NEUROSURGICAL PROCEDURES

Code	Description	Payable with Private Rooms Technical Fee Benefit	Pre-Approval Required	Payment Indicators	Payment Rules
5400	Hemispherectomy		No		
5484	Stereotactic computer assisted volumetric intracranial procedure		No		Payable in full with main benefit to Neurosurgeon or ENT.
5590	Intracranial sensory root division, trigeminal		No		
5665	Elevation of depressed skull fracture		No		
5690	Excision of osteoma calvarium		No	Day Care	
5693	Skull bone grafting to facial skeleton		No		
5695	Repair of platybasia		No		
5708	Revision or removal of intracranial neurostimulator electrodes		No		
5711	Percutaneous transcatheter occlusion or embolisation of tumour, acute haemorrhage, vascular malformation or aneurysm includes angioplasty, stenting or clot extraction from any vessel(s) external or internal carotid or vertebral arteries including distal branches; includes angiographic evaluation before, during and after the procedure, at the same session		No		Code 5711 is not claimable with Code 5712.
5712	Percutaneous transcatheter occlusion or embolisation of tumour, acute haemorrhage, vascular malformation or aneurysm includes angioplasty, stenting or clot extraction from any vessel(s) external or internal carotid or vertebral arteries including distal branches; including any combination of more than one of the following: microcatheter, balloon catheter; stent catheter or clot retrieval device required for complex embolisation; includes angiographic evaluation before, during and after the procedure, at the same session		No		Code 5712 is not claimable with Code 5711.
5725	Anomalies of cord vascular, operation for		No		
5741	Intraoperative neurophysiology testing by a consultant Neurophysiologist to monitor motor evoked potentials/ sensory evoked potentials of the spinal cord during spinal surgery		No		
5743	Botulinum toxin injection for treatment of cervical dystonia	Yes	No	Side Room	
5756	Intrathecal cytotoxic chemotherapy infusion		No	Side Room	
5763	Exploration of the brachial plexus with removal of tumours		No		
5771	Nerve root tumours, transthoracic or abdominal removal		No		
5772	Single surgeon transnasal or transseptal approach to remove a pituitary tumour or resect a portion of gland (I.P.)		No	Independent Procedure	
5773	Repair of encephalocele, skull vault, including cranioplasty		No		

## OTHER NEUROSURGICAL PROCEDURES

Code	Description	Payable with Private Rooms Technical Fee Benefit	Pre-Approval Required	Payment Indicators	Payment Rules
5777	Infratemporal post-auricular approach to middle cranial fossa (internal auditory meatus, petrous apex, tentorium, cavernous sinus, parasellar area, infratemporal fossa) including mastoidectomy, resection of sigmoid sinus with or without decompression and/ or mobilization of contents of auditory canal or petrous carotid artery		No		
5778	Trans cochlear approach to posterior cranial fossa, jugular foramen or midline skull base, including labyrinthectomy, decompression, with or without mobilization of facial nerve and/ or petrous carotid artery		No		
5786	Stereotactic lesioning (functional)		No		
5787	Stereotactic biopsy (CT or MRI targeted)		No		
5788	Cranioplasty for skull defect (I.P.)		No	Independent Procedure	
5789	Trans-oral approach to skull base, brain stem or upper spinal cord for biopsy, decompression or excision of lesion (I.P.)		No	Independent Procedure	
5791	Orbitocranial approach to anterior cranial fossa, extradural, including supraorbital ridge osteotomy and elevation of frontal and/ or temporal lobe(s) (I.P.)		No	Independent Procedure	
5792	Transtemporal approach to posterior cranial fossa, jugular foramen or midline skull base, including mastoidectomy, decompression of sigmoid sinus and/ or facial nerve (I.P.)		No	Independent Procedure	
5797	Endoscopic third ventriculostomy or cyst fenestration		No		

## SHUNTS

Code	Description	Payable with Private Rooms Technical Fee Benefit	Pre-Approval Required	Payment Indicators	Payment Rules
5520	Shunt insertion		No		
5525	Shunt revision		No		
5796	Shunt removal		No		

## SYMPATHECTOMY

Code	Description		Pre-Approval Required	Payment Indicators	Payment Rules
5761	Cervical sympathectomy, unilateral		No		
5762	Cervical sympathectomy, bilateral		No		
5765	Lumbar sympathectomy, unilateral		No		
5770	Lumbar sympathectomy, bilateral		No		