

# Dental & Oral Surgery

Schedule of Benefits  
for Professional Fees

## ANAESTHSIA

Code	Description	Pre-Approval Required	Payment Indicators	Payment Rules	Participating Consultant Surgeon/ Physician Rate	Standard Consultant Surgeon/ Physician Rate	Participating Consultant Anaesthesiologist Rate	Standard Consultant Anaesthesiologist Rate
398	Paediatric Dental - General Anaesthesia (I.P.)	Yes	Independent Procedure, Day Care	For use for approved paediatric dentistry procedures where the child is treated under GA.			€ 238	

## CORONECTOMY

Code	Description	Pre-Approval Required	Payment Indicators	Payment Rules	Participating Consultant Surgeon/ Physician Rate	Standard Consultant Surgeon/ Physician Rate	Participating Consultant Anaesthesiologist Rate	Standard Consultant Anaesthesiologist Rate
29761	The planned surgical removal of the crown of an impacted tooth to preserve the inferior dental nerve, where radiographic evidence suggests the nerve is at risk on complete tooth removal	Yes	Side Room		€ 297	€ 117	€ 222	€ 108
418996	Coronectomy	No	Day Care	An alternative treatment to complete extraction due to potential neurovascular injury as a result of the proximity of roots to the inferior alveolar nerve.	€ 354	€ 140	€ 228	€ 111

## GINGIVECTOMY

Code	Description	Pre-Approval Required	Payment Indicators	Payment Rules	Participating Consultant Surgeon/ Physician Rate	Standard Consultant Surgeon/ Physician Rate	Participating Consultant Anaesthesiologist Rate	Standard Consultant Anaesthesiologist Rate
2953	Gingivectomy, one to four teeth	No	Side Room	Gingivectomy is taken to include the removal of surface deposits from the roots. For codes 2953, 2954, and 2956 benefit is only approved in cases of severe gingival hyperplasia and which, in the opinion of Irish Life Health's dental advisors, are not treatable by conservative methods. Irish Life Health may seek full clinical details, x-rays and scans, or if more appropriate, photographs and pocket depths, in order to provide the deepest pocket depth for each tooth involved in gingival/ periodontal surgery on the pocket depth chart.	€ 170	€ 70	€ 195	€ 100
2954	Gingivectomy, five to eleven teeth	No	Side Room	Gingivectomy is taken to include the removal of surface deposits from the roots. For codes 2953, 2954, and 2956 benefit is only approved in cases of severe gingival hyperplasia and which, in the opinion of Irish Life Health's dental advisors, are not treatable by conservative methods. Irish Life Health may seek full clinical details, x-rays and scans, or if more appropriate, photographs and pocket depths, in order to provide the deepest pocket depth for each tooth involved in gingival/ periodontal surgery on the pocket depth chart.	€ 230	€ 95	€ 222	€ 111

## GINGIVECTOMY

Code	Description	Pre-Approval Required	Payment Indicators	Payment Rules	Participating Consultant Surgeon/ Physician Rate	Standard Consultant Surgeon/ Physician Rate	Participating Consultant Anaesthesiologist Rate	Standard Consultant Anaesthesiologist Rate
2956	Gingivectomy, twelve or more teeth	No	Side Room	Gingivectomy is taken to include the removal of surface deposits from the roots. For codes 2953, 2954, and 2956 benefit is only approved in cases of severe gingival hyperplasia and which, in the opinion of Irish Life Health's dental advisors, are not treatable by conservative methods. Irish Life Health may seek full clinical details, x-rays and scans, or if more appropriate, photographs and pocket depths, in order to provide the deepest pocket depth for each tooth involved in gingival/ periodontal surgery on the pocket depth chart.	€ 345	€ 140	€ 243	€ 122

## IMPACTED TOOTH

Code	Description	Pre-Approval Required	Payment Indicators	Payment Rules	Participating Consultant Surgeon/ Physician Rate	Standard Consultant Surgeon/ Physician Rate	Participating Consultant Anaesthesiologist Rate	Standard Consultant Anaesthesiologist Rate
2973	Removal of one upper impacted or unerupted tooth	No	Day Care		€ 236	€ 95	€ 215	€ 108
2974	Removal of two upper impacted or unerupted teeth	No	Day Care		€ 333	€ 140	€ 228	€ 111
2976	Removal of one lower impacted or unerupted tooth	No	Side Room		€ 309	€ 117	€ 229	€ 108
2977	Removal of two lower impacted or unerupted teeth	No	Day Care		€ 492	€ 187	€ 254	€ 111
2978	Removal of one impacted or unerupted canine tooth	No	Day Care		€ 288	€ 117	€ 215	€ 108
2979	Removal of two impacted or unerupted canine teeth	No	Day Care		€ 444	€ 187	€ 236	€ 111
2981	Removal of four or more impacted or unerupted teeth	No	Day Care		€ 737	€ 280	€ 387	€ 167
2982	Removal of three impacted or unerupted teeth which includes two lower teeth	No	Day Care		€ 541	€ 233	€ 294	€ 139
2983	Removal of three impacted or unerupted teeth which includes two upper teeth	No	Day Care		€ 463	€ 197	€ 249	€ 122
2984	Removal of one upper and one lower impacted or unerupted tooth	No	Day Care		€ 431	€ 164	€ 252	€ 111
3001	Surgical exposure and repositioning of an impacted tooth	No	Day Care		€ 236	€ 95	€ 202	€ 99
3002	Surgical exposure and repositioning of impacted teeth	No	Day Care		€ 350	€ 140	€ 226	€ 111
3032	Removal of an impacted or unerupted tooth in a patient 16 years or younger under general anaesthetic	No	Day Care		€ 350	€ 126	€ 248	€ 85
3033	Removal of two impacted or unerupted teeth in a patient 16 years or younger under general anaesthetic	No	Day Care		€ 469	€ 166	€ 248	€ 84
3036	Open surgical exposure of a single impacted tooth in compact bone in patients 16 years or younger	No	Day Care		€ 465	€ 166	€ 248	€ 84

## MAXILLOFACIAL

Code	Description	Pre-Approval Required	Payment Indicators	Payment Rules	Participating Consultant Surgeon/ Physician Rate	Standard Consultant Surgeon/ Physician Rate	Participating Consultant Anaesthesiologist Rate	Standard Consultant Anaesthesiologist Rate
3011	Temporomandibular joint, reconstruction osteotomy of ramus and joint with costochondral graft	No			€ 1,223	€ 497	€ 624	€ 317
3012	Temporomandibular joint, open surgical correction of dislocation (I.P.)	No	Independent Procedure		€ 959	€ 381	€ 503	€ 248
3013	Le Fort I osteotomy (includes segmental or cleft) with or without graft	No			€ 1,646	€ 656	€ 849	€ 419
3014	Le Fort II osteotomy (includes via bicoronal flap) with or without graft	No			€ 1,726	€ 705	€ 905	€ 456
3016	Osseointegrated mandibular implant including second stage abutment installation	No	Side Room	The professional fee benefit as detailed in this schedule is payable for non-cosmetic osseointegrated mandibular implants. This benefit is restricted to those who otherwise would be unable to wear a conventional full denture on the lower arch. Benefit is not payable for implants where: (a) A patient is partially dentate in the lower arch (b) A patient has no remaining natural teeth in the mandible opposing a natural dentition in the upper jaw or maxilla, unless there are exceptional circumstances In addition, a grant-in-aid of € 532.29 is payable per implant towards the cost of the implant components.	€ 376	€ 153	€ 197	€ 99
3017	Two osseointegrated mandibular implants including second stage abutment installation	No	Side Room	The professional fee benefit as detailed in this schedule is payable for non-cosmetic osseointegrated mandibular implants. This benefit is restricted to those who otherwise would be unable to wear a conventional full denture on the lower arch. Benefit is not payable for implants where: (a) A patient is partially dentate in the lower arch (b) A patient has no remaining natural teeth in the mandible opposing a natural dentition in the upper jaw or maxilla, unless there are exceptional circumstances In addition, a grant-in-aid of € 532.29 is payable per implant towards the cost of the implant components.	€ 484	€ 196	€ 243	€ 122
3018	Three osseointegrated mandibular implants including second stage abutment installation	No	Side Room	The professional fee benefit as detailed in this schedule is payable for non-cosmetic osseointegrated mandibular implants. This benefit is restricted to those who otherwise would be unable to wear a conventional full denture on the lower arch. Benefit is not payable for implants where: (a) A patient is partially dentate in the lower arch (b) A patient has no remaining natural teeth in the mandible opposing a natural dentition in the upper jaw or maxilla, unless there are exceptional circumstances In addition, a grant-in-aid of € 532.29 is payable per implant towards the cost of the implant components.	€ 587	€ 241	€ 293	€ 147
3019	Four osseointegrated mandibular implants including second stage abutment installation	No	Side Room	The professional fee benefit as detailed in this schedule is payable for non-cosmetic osseointegrated mandibular implants. This benefit is restricted to those who otherwise would be unable to wear a conventional full denture on the lower arch. Benefit is not payable for implants where: (a) A patient is partially dentate in the lower arch (b) A patient has no remaining natural teeth in the mandible opposing a natural dentition in the upper jaw or maxilla, unless there are exceptional circumstances In addition, a grant-in-aid of € 532.29 is payable per implant towards the cost of the implant components.	€ 771	€ 305	€ 385	€ 183

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Code	Description	Pre-Approval Required	Payment Indicators	Payment Rules	Participating Consultant Surgeon/ Physician Rate	Standard Consultant Surgeon/ Physician Rate	Participating Consultant Anaesthesiologist Rate	Standard Consultant Anaesthesiologist Rate
3021	Five osseointegrated mandibular implants including second stage abutment installation	No	Side Room	The professional fee benefit as detailed in this schedule is payable for non-cosmetic osseointegrated mandibular implants. This benefit is restricted to those who otherwise would be unable to wear a conventional full denture on the lower arch. Benefit is not payable for implants where: (a) A patient is partially dentate in the lower arch (b) A patient has no remaining natural teeth in the mandible opposing a natural dentition in the upper jaw or maxilla, unless there are exceptional circumstances In addition, a grant-in-aid of € 532.29 is payable per implant towards the cost of the implant components.	€ 860	€ 350	€ 433	€ 214
3022	Six or more osseointegrated mandibular implants including second stage abutment installation	No	Side Room	The professional fee benefit as detailed in this schedule is payable for non-cosmetic osseointegrated mandibular implants. This benefit is restricted to those who otherwise would be unable to wear a conventional full denture on the lower arch. Benefit is not payable for implants where: (a) A patient is partially dentate in the lower arch (b) A patient has no remaining natural teeth in the mandible opposing a natural dentition in the upper jaw or maxilla, unless there are exceptional circumstances In addition, a grant-in-aid of € 532.29 is payable per implant towards the cost of the implant components.	€ 962	€ 393	€ 484	€ 238
3024	Le Fort III osteotomy via bicoronal flap with or without graft with Le Fort I	No			€ 2,439	€ 995	€ 1,275	€ 646
3026	Reconstruction midface, osteotomies (other than Le Fort I type) and bone grafts (includes obtaining autografts) (includes via bicoronal flap)	No			€ 1,726	€ 705	€ 905	€ 456
3027	Sagittal split osteotomy with or without graft	No			€ 1,397	€ 556	€ 712	€ 354
3028	Vertical ramus osteotomy, intraoral or extraoral with or without graft	No			€ 1,420	€ 581	€ 747	€ 378
3029	Zygomatic osteotomy, unilateral	No			€ 1,223	€ 447	€ 638	€ 324
3030	Tuberosity's, reduction of	No	Side Room		€ 236	€ 91	€ 200	€ 69

## ODONTOMA

Code	Description	Pre-Approval Required	Payment Indicators	Payment Rules	Participating Consultant Surgeon/ Physician Rate	Standard Consultant Surgeon/ Physician Rate	Participating Consultant Anaesthesiologist Rate	Standard Consultant Anaesthesiologist Rate
2985	Odontoma, excision of (I.P.)	No	Independent Procedure, Day Care		€ 291	€ 113	€ 204	€ 69
3034	Surgical removal of odontoma(s) in a patient 16 years or younger under general anaesthetic	No	Day Care		€ 469	€ 166	€ 248	€ 84

## OTHER DENTAL PROCEDURES

Code	Description	Pre-Approval Required	Payment Indicators	Payment Rules	Participating Consultant Surgeon/ Physician Rate	Standard Consultant Surgeon/ Physician Rate	Participating Consultant Anaesthesiologist Rate	Standard Consultant Anaesthesiologist Rate
2940	Dental cysts of maxilla or mandible	No	Day Care	Cystic tissue removed in the process of tooth or root resection and extractions, surgical or otherwise, is considered to be an integral part of that surgical treatment and is not a separate procedure.	€ 350	€ 136	€ 226	€ 69
2980	Labial frenectomy with dissection of tissue	No	Side Room		€ 117	€ 46	€ 198	€ 69
3015	Reimplantation of tooth in socket with splinting	No	Side Room		€ 230	€ 91	€ 197	€ 69
3020	Simple cysts or epulis, palate or floor of mouth, excision of	No	Side Room		€ 236	€ 91	€ 202	€ 69
3025	Small tumours of dental origin, removal of, includes biopsy	No	Side Room		€ 169	€ 85	€ 200	€ 69
3037	Open surgical exposure of two teeth in compact bone in patients 16 years or younger	No	Day Care		€ 580	€ 249	€ 354	€ 126

## PERIDONTAL PROCEDURE

Code	Description	Pre-Approval Required	Payment Indicators	Payment Rules	Participating Consultant Surgeon/ Physician Rate	Standard Consultant Surgeon/ Physician Rate	Participating Consultant Anaesthesiologist Rate	Standard Consultant Anaesthesiologist Rate
2996	Periodontal mucoperiosteal flap surgery, one to four teeth	No	Side Room	For codes 2996, 2997 and 2998, the term periodontal mucoperiosteal flap surgery is used to denote the incisions and subsequent elevation of a mucogingival flap in order to gain access to tooth roots for the purpose of root planning, curettage, osseous surgery and placements of grafts. Benefit only applies when flaps are raised in order to gain access to periodontal sites where pocket depths are 6mm or more. ILH have been advised that periodontal surgical procedures have been replaced by more conservative (closed) methods of treatment, such as root planning or scaling. These procedures are not covered by Irish Life Health In exceptional cases, where serious periodontal disease is present which, in the opinion of Irish Life Health's dental advisors, is not treatable by conservative methods and where pocket depths are 6mm or more. Irish Life Health will consider such cases for payment Prior notification, including full clinical details, relevant radiographs and pocket depths, should be sent to Irish Life Health for this purpose. It is necessary to provide the deepest pocket depth for each tooth involved in gingival/ periodontal surgery on the pocket depths chart in order to have precertification approval.	€ 236	€ 95	€ 202	€ 99

## PERIDONTAL PROCEDURE

Code	Description	Pre-Approval Required	Payment Indicators	Payment Rules	Participating Consultant Surgeon/ Physician Rate	Standard Consultant Surgeon/ Physician Rate	Participating Consultant Anaesthesiologist Rate	Standard Consultant Anaesthesiologist Rate
2997	Periodontal mucoperiosteal flap surgery, five to eleven teeth	No	Side Room	For codes 2996, 2997 and 2998, the term periodontal mucoperiosteal flap surgery is used to denote the incisions and subsequent elevation of a mucogingival flap in order to gain access to tooth roots for the purpose of root planning, curettage, osseous surgery and placements of grafts. Benefit only applies when flaps are raised in order to gain access to periodontal sites where pocket depths are 6mm or more. ILH have been advised that periodontal surgical procedures have been replaced by more conservative (closed) methods of treatment, such as root planning or scaling. These procedures are not covered by Irish Life Health In exceptional cases, where serious periodontal disease is present which, in the opinion of Irish Life Health's dental advisors, is not treatable by conservative methods and where pocket depths are 6mm or more. Irish Life Health will consider such cases for payment Prior notification, including full clinical details, relevant radiographs and pocket depths, should be sent to Irish Life Health for this purpose. It is necessary to provide the deepest pocket depth for each tooth involved in gingival/ periodontal surgery on the pocket depths chart in order to have precertification approval.	€ 341	€ 140	€ 220	€ 111
2998	Periodontal mucoperiosteal flap surgery, twelve or more teeth	No	Side Room	For codes 2996, 2997 and 2998, the term periodontal mucoperiosteal flap surgery is used to denote the incisions and subsequent elevation of a mucogingival flap in order to gain access to tooth roots for the purpose of root planning, curettage, osseous surgery and placements of grafts. Benefit only applies when flaps are raised in order to gain access to periodontal sites where pocket depths are 6mm or more. ILH have been advised that periodontal surgical procedures have been replaced by more conservative (closed) methods of treatment, such as root planning or scaling. These procedures are not covered by Irish Life Health In exceptional cases, where serious periodontal disease is present which, in the opinion of Irish Life Health's dental advisors, is not treatable by conservative methods and where pocket depths are 6mm or more. Irish Life Health will consider such cases for payment Prior notification, including full clinical details, relevant radiographs and pocket depths, should be sent to Irish Life Health for this purpose. It is necessary to provide the deepest pocket depth for each tooth involved in gingival/ periodontal surgery on the pocket depths chart in order to have precertification approval.	€ 452	€ 187	€ 230	€ 117

## ROOT RESECTION/ REMOVAL

Code	Description	Pre-Approval Required	Payment Indicators	Payment Rules	Participating Consultant Surgeon/ Physician Rate	Standard Consultant Surgeon/ Physician Rate	Participating Consultant Anaesthesiologist Rate	Standard Consultant Anaesthesiologist Rate
2930	Buried tooth roots, (includes more than one root) of one tooth, removal of	No	Side Room	For codes 2930 and 2935, the term “buried roots” refers to roots which are firmly invested in bone and require surgical removal of bone to effect their excision. Benefit does not apply to superficial roots which can be removed with simple elevation. Please note that the benefit in respect of the removal of impacted or buried teeth and roots includes the removal of the follicle or associated pathological tissue such as abscess, granulomatous and/ or cystic tissue.	€ 233	€ 88	€ 210	€ 99
2935	Buried tooth roots, (multiple) of teeth, removal of	No	Day Care	For codes 2930 and 2935, the term “buried roots” refers to roots which are firmly invested in bone and require surgical removal of bone to effect their excision. Benefit does not apply to superficial roots which can be removed with simple elevation. Please note that the benefit in respect of the removal of impacted or buried teeth and roots includes the removal of the follicle or associated pathological tissue such as abscess, granulomatous and/ or cystic tissue.	€ 376	€ 140	€ 240	€ 111
3005	Root resection or apicectomy, single, with or without cyst removal and apical curettage	No	Side Room		€ 236	€ 91	€ 202	€ 69
3010	Root resection or apicectomy, multiple, with or without cyst removal and apical curettage	No	Side Room		€ 350	€ 136	€ 234	€ 88

## TOOTH EXTRACTION

Code	Description	Pre-Approval Required	Payment Indicators	Payment Rules	Participating Consultant Surgeon/ Physician Rate	Standard Consultant Surgeon/ Physician Rate	Participating Consultant Anaesthesiologist Rate	Standard Consultant Anaesthesiologist Rate
2950	Extraction of teeth (more than six permanent teeth) with or without alveolectomy	No	Side Room		€ 291	€ 113	€ 240	€ 69
994410	Consultation Review, Extraction and bone graft on same day	No	Day Care		€ 496	€ 200	€ 314	€ 126
994411	Extraction of more than 6 teeth with or without alveolectomy, in a patient 16 years or younger under general anaesthetic	No	Day Care		€ 289	€ 162	€ 227	€ 135