

Reconstructive Surgery

Schedule of Benefits
for Professional Fees

BREAST RECONSTRUCTION

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4475	Soft palate partial cleft, reconstruction of	No			€ 786.44	€ 319.00	€ 377.86	€ 88.00
4476	Unilateral mastopexy (at same operative session as any surgery on the opposite breast)	No		Benefit is payable in full with code for the primary procedure	€ 547.62	€ 208.00	€ 274.64	€ 106.00
4477	Breast reconstruction with free flap, post-mastectomy DIEP (deep inferior epigastric perforators) - single surgeon - harvest and reconstruction (I.P.)	No	Independent Procedure		€ 3,049.08	€ 1,356.00	€ 1,649.05	€ 848.00
4478	Breast reconstruction with pedicled transverse rectus abdominis myocutaneous flap (TRAM) (I.P.)	No	Independent Procedure		€ 2,278.58	€ 1,101.00	€ 1,164.13	€ 617.00
4479	Nipple reconstruction post mastectomy	No	Day Care		€ 596.18	€ 251.00	€ 304.03	€ 88.00
4480	Breast reduction (unilateral)	Yes		Benefit for payment for breast reduction will be provided in the following circumstances: (a) BMI < 27 (b) Bra cup size ≥ F (c) Skin fold rask, intertrigio (d) Symptoms: (i) Back pain, either thoracic or cervical, that has persisted for at least a continuous three month period and has been severe enough to require daily use of prescription analgesia for at least four weeks (ii) Acromio-clavicular syndrome	€ 1,467.86	€ 636.00	€ 682.65	€ 117.00
4482	Plastic repair of inverted nipple	No	Day Care		€ 651.51	€ 273.00	€ 346.98	€ 53.00
4484	Unilateral mastopexy in a delayed setting	No		Post Mastectomy only	€ 1,089.61	€ 455.00	€ 548.16	€ 136.00
4485	Breast reconstruction, vertical rectus flap, post mastectomy (I.P.)	No	Independent Procedure	Post Mastectomy only	€ 1,301.42	€ 523.00	€ 710.24	€ 225.00
4486	Breast reconstruction, latissimus dorsi flap, with or without implant, post mastectomy (unilateral) (I.P.)	No	Independent Procedure	Post Mastectomy only	€ 1,261.23	€ 432.00	€ 688.30	€ 120.00
4487	Breast reconstruction, other flap, with or without implant, post mastectomy (I.P.)	No	Independent Procedure	Post Mastectomy only	€ 1,261.23	€ 432.00	€ 688.30	€ 88.00
4502	Free muscle transfer, pectoralis minor, gracilis or extensor digitorum brevis as a second stage procedure to code 4501	No			€ 1,857.41	€ 773.00	€ 951.65	€ 283.00
4553	Removal of expander (other than breast) and inserting of expanded skin	No			€ 681.99	€ 296.00	€ 359.41	€ 88.00
4555	Accessory auricles, removal	No	Day Care		€ 220.18	€ 91.00	€ 186.49	€ 48.00
4556	Delayed (or immediate by a second surgeon at the time of the primary surgery) insertion of breast prosthesis or expander (includes subsequent expansions) following mastopexy, mastectomy or in reconstruction (I.P.)	No	Independent Procedure		€ 853.62	€ 431.00	€ 505.21	€ 269.00

BREAST RECONSTRUCTION

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
30120	Rhinophyma (I.P.)	Yes	Independent Procedure	Supported by a consultant report and photographic evidence	€ 668.62	€ 290.00	€ 406.66	€ 175.00
44480	Breast reduction (bilateral)	Yes		Benefit for payment for breast reduction will be provided in the following circumstances: (a) BMI < 27 (b) Bra cup size ≥ F (c) Skin fold rask, intertrigio (d) Symptoms: (i) Back pain, either thoracic or cervical, that has persisted for at least a continuous three month period and has been severe enough to require daily use of prescription analgesia for at least four weeks (ii) Acromio-clavicular syndrome	€ 2,198.48	€ 739.00	€ 1,028.75	€ 376.00
44771	Flap implantation for unilateral breast reconstruction with free flap, post-mastectomy DIEP (deep inferior epigastric perforators) - dual surgeons (I.P.)	Yes	Independent Procedure	Paid at 100% in conjunction with code 44772, paid at 100% in conjunction with code 44800 and only where performed in an ILH approved private hospital, with an approved iCU as listed by Irish Life Health or a HSE level 4 Hospital, by a consultant who is credentialed to perform these procedures	€ 3,900.00	€ 1,356.00	€ 2,100.00	€ 612.00
44772	Flap harvest for unilateral breast reconstruction with free flap, post-mastectomy DIEP (deep inferior epigastric perforators) - dual surgeons (I.P.)	Yes	Independent Procedure	Paid at 100% in conjunction with code 44771, paid at 100% in conjunction with code 44800 and only where performed in an ILH approved private hospital, with an approved iCU as listed by Irish Life Health or a HSE level 4 Hospital, by a consultant who is credentialed to perform these procedures	€ 1,500.00	€ 659.00		
44773	Free fat injection, post mastectomy (I.P.)	Yes	Independent Procedure	For correction of breast defect post breast reconstruction surgery (non cosmetic). Limit of 3 per lifetime, per breast	€ 842.37	€ 340.00	€ 451.33	€ 88.00
44777	Flap implantation for bi-lateral breast reconstruction with free flap, post-mastectomy DIEP (deep inferior epigastric perforators) - dual surgeons (I.P.)	Yes	Independent Procedure	Paid at 100% of rate in conjunction with breast surgery code and only where performed in an ILH approved private hospital, with an approved iCU as listed by Irish Life Health or a HSE level 4 Hospital, by a consultant who is credentialed to perform these procedures	€ 5,100.00	€ 1,800.00	€ 2,700.00	€ 995.00
212015	Wounds greater than 7.5cm in total length, suture of lacerated or torn facial tissue, single or multi layered closure with or without irrigation or debridement (I.P.)	No	Independent Procedure, Side Room	Benefit payable to Plastic and Reconstructive Surgeons only in a hospital setting	€ 632.65	€ 80.00	€ 192.43	€ 105.00
430311	Lipofilling	Yes			€ 466.04	€ 200.00	€ 349.87	€ 180.00
441192	Partial reconstruction of breast with pedicaled perforator flap (PLCAP; TDAP etc.)	No		Post Mastectomy only	€ 1,124.33	€ 455.00	€ 565.62	€ 200.00
441193	Local mobilisation of glandular breast tissue to fill surgical cavity	No		Post Mastectomy only	€ 699.06	€ 300.00	€ 443.17	€ 136.00
441506	Breast reconstruction, latissimus dorsi flap, with or without implant, post mastectomy (bilateral)	No		Post Mastectomy only	€ 1,468.03	€ 450.00	€ 874.68	€ 120.00
444466	Bilateral breast reconstruction using fixed prosthesis and acellular dermal matrix (ADM) (I.P.)	No	Independent Procedure	Post Mastectomy only	€ 1,952.13	€ 523.00	€ 1,065.36	€ 225.00

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CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
444467	Bilateral breast reconstruction using acellular dermal matrix (ADM) (I.P.)	No	Independent Procedure	Post Mastectomy only	€ 1,777.37	€ 450.00	€ 1,030.36	€ 200.00
444468	Unilateral breast reconstruction using fixed prosthesis and acellular dermal matrix (ADM) (I.P.)	No	Independent Procedure	Post Mastectomy only	€ 1,301.42	€ 523.00	€ 710.24	€ 225.00
444469	Unilateral breast reconstruction using acellular dermal matrix (ADM) (I.P.)	No	Independent Procedure	Post Mastectomy only	€ 1,184.91	€ 450.00	€ 686.91	€ 200.00
444472	PAP flap breast reconstruction procedure including flap harvesting from both inner thighs (bilateral reconstruction) (I.P.)	No	Independent Procedure	Post Mastectomy only	€ 1,514.63	€ 636.00	€ 704.41	€ 117.00
444473	PAP flap breast reconstruction procedure including flap harvesting from one inner thighs (for unilateral reconstruction) (I.P.)	No	Independent Procedure	Post Mastectomy only	€ 1,514.63	€ 636.00	€ 704.41	€ 117.00
444546	Enucleation or excision of lipoma (I.P.)	No	Independent Procedure	For consultant only use for lesions in excess of 6cm	€ 168.52	€ 55.00		
444673	Breast reconstruction pedicle performance flap - single surgeon - harvest and reconstruction (I.P.)	No	Independent Procedure	Post Mastectomy only	€ 1,980.68	€ 650.00	€ 991.30	€ 250.00

BURNS/ WOUNDS								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
3061	Giant cell tumour, excision of primary or recurrent lesion from bone or soft tissue (I.P.)	No	Independent Procedure		€ 786.44	€ 319.00	€ 402.35	€ 69.00
4337	Debridement of wound, which may include skin, or subcutaneous tissue or muscle less than 9% of body surface	No			€ 407.61	€ 196.00	€ 206.83	€ 111.00
4338	Debridement of wound, which may include skin, or subcutaneous tissue or muscle between 9% and 18% of body surface	No			€ 609.73	€ 295.00	€ 310.81	€ 167.00
4339	Debridement of wound includes skin, and/ or subcutaneous tissue, and/ or muscle greater than 18% of body surface	No			€ 1,017.34	€ 491.00	€ 518.77	€ 276.00
4341	Debridement and skin grafting of wound less than 9% of body surface; includes excision of open wound, burn eschar or scar excision	No			€ 676.34	€ 327.00	€ 346.98	€ 184.00
4342	Debridement and skin grafting of wound between 9% and 18% of body surface; includes excision of open wound, burn eschar or scar excision	No			€ 1,017.34	€ 491.00	€ 518.77	€ 276.00

BURNS/ WOUNDS

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4343	Debridement and skin grafting of wound greater than 18% of body surface; includes excision of open wound, burn eschar or scar excision	No			€ 1,625.95	€ 787.00	€ 835.23	€ 443.00
4371	Escharotomy	No			€ 365.84	€ 179.00	€ 188.75	€ 99.00
4372	Acellular dermal replacement; first 100 sq.cm. or less, or 1% of body area of infants and children	No		For codes 4372 and 4373 a comprehensive report must be provided on the claim form detailing body area and square cm involved	€ 462.94	€ 231.00	€ 274.64	€ 145.00
4373	Acellular dermal replacement; each additional 100 sq. cm. or each additional 1% of body area of infants and children	No		For codes 4372 and 4373 a comprehensive report must be provided on the claim form detailing body area and square cm involved	€ 121.95	€ 60.00	€ 73.46	€ 37.00
4385	Inlay grafts (ankle)	No			€ 886.65	€ 364.00	€ 446.67	€ 69.00
4395	Inlay grafts (fingers)	No			€ 553.42	€ 227.00	€ 289.22	€ 69.00
4400	Inlay grafts (knee)	No			€ 930.91	€ 364.00	€ 435.01	€ 69.00
4405	Scar excisions (per scar) flexion, fingers, elbows, groin, knees	No	Day Care		€ 438.10	€ 183.00	€ 220.39	€ 69.00
4514	Free osteocutaneous flap with microvascular anastomosis, any area	No			€ 3,355.77	€ 1,622.00	€ 1,706.63	€ 905.00
4538	Treatment of superficial wound dehiscence; simple closure with or without packing (single layer closure)	No			€ 200.98	€ 99.00	€ 186.49	€ 90.00
4539	Secondary closure of wound or dehiscence, as a result of burn, includes excision of granulation and scar tissue; suturing in several layers, extensive site (I.P.)	No	Independent Procedure		€ 609.73	€ 295.00	€ 310.81	€ 167.00
4541	Skin grafting of granulating wound less than 9% of body surface	No			€ 407.61	€ 196.00	€ 206.83	€ 111.00
4542	Skin grafting of wound between 9% and 18% of body surface	No			€ 882.97	€ 426.00	€ 450.96	€ 240.00
45461	Keloids and hypertrophic scars intralesional injection of triamcinolone; up to and including the sixth lesions, under 12 in an Irish Life Health approved hospital (I.P.)	No	Independent Procedure, Side Room		€ 100.20	€ 41.00		
212013	Wounds up to 2.5 cm in total length, suture of lacerated or torn facial tissue, single or multi layered closure with or without irrigation or debridement (I.P.)	No	Independent Procedure, Side Room	Benefit payable to Plastic and Reconstructive Surgeons only in a hospital setting	€ 210.88	€ 65.00	€ 192.43	€ 105.00
212014	Wounds from 2.6 cm to 7.5 cm in total length, suture of lacerated or torn facial tissue, single or multi layered closure with or without irrigation or debridement (I.P.)	No	Independent Procedure, Side Room	Benefit payable to Plastic and Reconstructive Surgeons only in a hospital setting	€ 316.33	€ 65.00	€ 192.43	€ 105.00

CLEFT LIP AND PALATE								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4410	Z plasty (per scar) flexion, fingers, elbows, groin, knees	No	Day Care		€ 438.10	€ 183.00	€ 220.39	€ 69.00
4415	Adjustment of lip margin	No			€ 220.18	€ 91.00	€ 186.49	€ 48.00
4420	Adjustment of scars, secondary	No			€ 220.18	€ 91.00	€ 186.49	€ 69.00
4425	Cleft palate reconstruction	No			€ 905.29	€ 364.00	€ 452.50	€ 117.00
4430	Complete cleft lip and anterior palate repair	No			€ 1,124.33	€ 455.00	€ 565.62	€ 117.00
4431	Primary repair, unilateral cleft lip	No			€ 1,124.33	€ 455.00	€ 565.62	€ 117.00
4432	Primary repair, bilateral cleft lip	No			€ 1,182.58	€ 477.00	€ 565.62	€ 117.00
4433	Secondary repair, unilateral cleft lip	No			€ 1,124.33	€ 455.00	€ 565.62	€ 117.00
4434	Secondary repair, bilateral cleft lip	No	Day Care		€ 1,182.58	€ 477.00	€ 598.27	€ 117.00
4440	Fistula, secondary closure of	No			€ 905.29	€ 364.00	€ 452.50	€ 88.00
4460	Maxillary bone graft for cleft palate	No			€ 1,124.33	€ 455.00	€ 565.62	€ 136.00
4465	Nostril margin, secondary correction of	No			€ 672.26	€ 273.00	€ 340.54	€ 69.00
4466	Total cleft rhinoplasty	No			€ 1,304.14	€ 409.00	€ 774.20	€ 117.00
4470	Pharyngoplasty (not for snoring)	No			€ 905.29	€ 364.00	€ 452.50	€ 117.00

CONSULTATION								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
825013	Lateral canthopexy	No			€ 344.87	€ 207.00	€ 207.59	€ 130.00
856598	Consultant Plastic & Reconstructive Surgeon Private Rooms Higher Technical Fee	No		An all-inclusive technical fee to the consultant, to be charged in conjunction with specified Schedule of Benefits procedure professional fee - payable at 100% of the stated amount in addition to procedure professional fee. Applicable only where a procedure is performed in the consultants own rooms and no invoice for a hospital/ scan centre/ approved ILH facility (as listed in the members handbook) is received Payable in conjunction with procedure codes outlined in the ground rules	€ 130.81			

DELAYED FACIAL REANIMATION								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4492	Facial trauma, grafting of facial nerve, sural nerve, greater auricular nerve	No			€ 1,089.61	€ 455.00	€ 524.42	€ 117.00
4493	Excision of facial nerve and graft, sural nerve, greater auricular nerve	No			€ 1,261.23	€ 523.00	€ 652.14	€ 117.00
4494	Wedge excision of lower lip to restore oral continence in the presence of facial palsy	No	Side Room		€ 786.44	€ 319.00	€ 396.52	€ 95.00
4496	Nasolabial skin/ dermal hitch	No			€ 541.98	€ 227.00	€ 280.29	€ 88.00
4497	Temporalis fascial sling, oral, nasolabial, ocular	No			€ 1,424.96	€ 592.00	€ 719.95	€ 196.00
4498	Orbicularis oris hitch	No			€ 1,470.36	€ 592.00	€ 742.89	€ 196.00
4499	Masseter to oral angle, digastric to lower lip or temporalis to fascial slings	No			€ 1,424.96	€ 592.00	€ 700.74	€ 196.00
4500	Facial nerve graft (in face), (see ENT operations for facial nerve graft in facial canal)	No			€ 1,315.43	€ 546.00	€ 639.70	€ 136.00
4501	Cross facial nerve grafting, hypoglossal/ facial nerve reanimation	No			€ 1,857.41	€ 773.00	€ 964.08	€ 283.00
4504	Nipple - areola tattooing performed by a consultant (one or more visits)	No	Side Room	Benefit payable following breast reconstruction procedures which were eligible for Irish Life Health benefit and when carried out by consultant Plastic Surgeon registered with Irish Life Health	€ 344.34	€ 164.00		

EAR								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4554	Immediate insertion of breast prosthesis following mastopexy, mastectomy or in reconstruction	No			€ 481.01	€ 243.00	€ 287.08	€ 152.00
4557	Replacement of tissue expander with permanent prosthesis (I.P.)	No	Independent Procedure		€ 602.95	€ 303.00	€ 353.76	€ 189.00
4560	Epithelioma of ear, excision and reconstruction, lobule placement	No	Side Room		€ 438.10	€ 183.00	€ 220.39	€ 69.00
4561	Cartilage graft(s), reconstruction of ear	No			€ 980.08	€ 409.00	€ 493.91	€ 95.00
4575	Protruding ears, correction with reconstruction of folds, bilateral	No	Day Care	Benefit only payable for patients up to eighteen years of age	€ 822.00	€ 340.00	€ 414.79	€ 88.00

ECHOCARDIOGRAPHY								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
444801	Additional benefit where two Anaesthetists attend complex surgery for a theatre session in excess of 6 hours - rate for each hour in excess of 6 hours base level. Note the primary Anaesthetist will be paid the procedure code fee and the second attending consultant will be paid the fee as set out in this code	No		Evidence of hours of surgery and relevant documentation will be required			€ 233.24	€ 65.00

EXCISIONS								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
856599	Consultant Plastic & Reconstructive Surgeon Private Rooms Technical Fee	No		An all-inclusive technical fee to the consultant, to be charged in conjunction with specified Schedule of Benefits procedure professional fee - payable at 100% of the stated amount in addition to procedure professional fee. Applicable only where a procedure is performed in the consultants own rooms and no invoice for a hospital/ scan centre/ approved ILH facility (as listed in the members handbook) is received Payable in conjunction with procedure codes outlined in the ground rules	€ 88.95			

EAR								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4555	Accessory auricles, removal	No	Day Care		€ 220.18	€ 91.00	€ 186.49	€ 48.00
4560	Epithelioma of ear, excision and reconstruction, lobule placement	No	Side Room		€ 438.10	€ 183.00	€ 220.39	€ 69.00
4561	Cartilage graft(s), reconstruction of ear	No			€ 980.08	€ 409.00	€ 493.91	€ 95.00
4575	Protruding ears, correction with reconstruction of folds, bilateral	No	Day Care	Benefit only payable for patients up to eighteen years of age	€ 822.00	€ 340.00	€ 414.79	€ 88.00
4580	Protruding ears, correction of with reconstruction of folds, unilateral	No	Day Care	Benefit only payable for patients up to eighteen years of age	€ 541.98	€ 227.00	€ 274.64	€ 69.00

EXCISIONS								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4547	Excision, excessive skin and subcutaneous tissue (includes lipectomy); abdomen; infraumbilical panniculectomy	Yes		Benefit is payable for procedure code 4547 only in the following circumstances: Where the panniculus hangs below the level of the pubis; and the medical records document that the panniculus causes chronic intertrigo (dermatitis occurring on opposed surfaces of the skin, skin irritation, infection or chafing) that consistently recurs over 3 months while receiving appropriate medical therapy, or remains refractory to appropriate medical therapy over a period of 3 months Pre certification required	€ 1,309.79	€ 659.00	€ 914.35	€ 412.00

EYES								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4580	Protruding ears, correction of with reconstruction of folds, unilateral	No	Day Care	Benefit only payable for patients up to eighteen years of age	€ 541.98	€ 227.00	€ 274.64	€ 69.00
4585	Reconstruction of contracted ocular socket	No			€ 1,200.26	€ 319.00	€ 603.54	€ 117.00
4595	Enophthalmos, bone graft	No			€ 1,011.31	€ 409.00	€ 485.16	€ 117.00
4605	Decompression, orbit	No			€ 1,096.39	€ 455.00	€ 548.16	€ 166.00
4610	Eyebrow graft	No			€ 452.06	€ 183.00	€ 233.24	€ 69.00
4615	Eyelids, repair of, for avulsion	No			€ 438.10	€ 183.00	€ 220.39	€ 69.00
4620	Eyelid, inlay grafts (one lid)	No	Side Room		€ 762.17	€ 319.00	€ 384.27	€ 69.00
4625	Eyelid operations in facial paralysis	No		Visual fields must be supplied with claim form	€ 659.45	€ 275.00	€ 335.87	€ 69.00
4630	Eyelid, reconstruction of less than 66% of surface area	No	Day Care		€ 1,089.61	€ 455.00	€ 548.16	€ 88.00
4635	Muscle advancement for ptosis, unilateral	No	Day Care		€ 822.00	€ 340.00	€ 414.79	€ 88.00
444800	Co-surgery benefit for two surgeons who perform complex breast flap surgery (bilateral) including flap raising and vessel harvesting, for a theatre session in excess of 6 hours - for each hour in excess of 6 hours base (I.P.) - Plastic or Breast surgeons benefit	No		Evidence of hours of surgery and relevant documentation will be required	€ 349.53	€ 75.00	€ 233.24	€ 65.00
825011	Removal by contouring of benign tumour of facial bone (e.g. fibrous dysplasia)	No			€ 657.12	€ 396.00	€ 390.69	€ 244.00

FACIAL TRAUMA								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4488	Mammoplasty, augmentation with prosthetic implant to restore symmetry	Yes		Benefit for corrective surgery for breast asymmetry will be provided in the following circumstances: (a) Poland's syndrome i.e. where there is absence or hypoplasia of one or both breasts, and an absence/underdevelopment of one of the major chest muscles (b) Restoration of symmetry following mastectomy	€ 645.86	€ 160.00	€ 330.02	€ 69.00
4489	Facial trauma, suturing of facial nerve	No			€ 877.33	€ 364.00	€ 427.22	€ 95.00
4491	Facial trauma, suturing of facial nerve branch	No			€ 762.17	€ 319.00	€ 353.76	€ 88.00

FLAPS AND/ OR GRAFTS

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4510	Facial reanimation in facial paralysis, unilateral	No			€ 1,470.36	€ 592.00	€ 742.89	€ 136.00
4513	Free skin and/ or muscle flap with microvascular anastomosis	No			€ 2,691.84	€ 1,356.00	€ 1,598.13	€ 848.00
4935	Fracture of nose, open reduction with internal or external fixation	No	Day Care		€ 509.15	€ 204.00	€ 289.22	€ 69.00
4937	Excision of benign or malignant lesion(s), any area; adjacent tissue transfers or rearrangement, where the is the requirement for more than 1 layer of deep or deep dermal sutures for effective closure	No	Side Room	Procedure codes 4937, 4938, 4939, 4941, 4942, 4943 and 4946 are only payable to consultants Plastic Surgeons	€ 225.82	€ 86.00		
4938	Excision of benign or malignant lesion(s), any area; adjacent tissue transfer or rearrangement, where there is the requirement for quilting or mattress sutures for effective closure	No	Side Room	Procedure codes 4937, 4938, 4939, 4941, 4942, 4943 and 4946 are only payable to consultants Plastic Surgeons	€ 558.69	€ 212.00		
4940	Fracture of nose, open reduction with open reduction of fractured septum	No	Day Care		€ 786.44	€ 319.00	€ 435.01	€ 69.00
4941	Excision of benign or malignant lesion(s), any area; adjacent tissue transfer or rearrangement, for wounds with significant (>3cm) of overhanging skin flaps after excision of lesion or mass	No	Day Care	Procedure codes 4937, 4938, 4939, 4941, 4942, 4943 and 4946 are only payable to consultants Plastic Surgeons	€ 767.81	€ 293.00	€ 456.61	€ 176.00
4942	Skin graft (pinch, split thickness, epidermal, dermal or tissue culture or free flap excised from a distant site and harvested as a graft from non adjacent skin) for repair when direct wound closure or adjacent tissue transfer is not possible; with codes 4937 or 4938. (List separately in addition to code for primary procedure. Benefit shown is payable in full with code for the primary procedure)	No		Procedure codes 4937, 4938, 4939, 4941, 4942, 4943 and 4946 are only payable to consultants Plastic Surgeons	€ 200.98	€ 77.00	€ 186.49	€ 66.00
4943	Skin graft (pinch, split thickness, epidermal, dermal or tissue culture or free flap excised from a distant site and harvested as a graft from non adjacent skin) for repair when direct wound closure or adjacent tissue transfer is not possible; with code 4939. (List separately in addition to code for primary procedure. Benefit shown is payable in full with code for the primary procedure) (see note after procedure 4946)	No		Procedure codes 4937, 4938, 4939, 4941, 4942, 4943 and 4946 are only payable to consultants Plastic Surgeons	€ 225.82	€ 86.00	€ 186.49	€ 66.00
4945	Reconstruction with imported flaps, partial	No	Day Care		€ 980.08	€ 409.00	€ 493.91	€ 117.00
4947	Large lipoma > 4 cm in diameter, requiring removal under general anaesthetic, deep to deep fascia requiring surgery by consultant Plastic Surgeon	No		1 Night Only	€ 383.91	€ 228.00	€ 226.04	€ 142.00
4950	Reconstruction with imported flaps, total	No			€ 1,200.26	€ 500.00	€ 591.11	€ 117.00
4951	Free flap (microvascular transfer) to face, complete procedure	No			€ 2,691.84	€ 1,356.00	€ 1,598.13	€ 848.00
4955	Re-fracture and open corrective rhinoplasty including nasal tip deformities (code 4915), unless demonstrable evidence discloses significant nasal tip deformity being corrected (I.P.)	No	Independent Procedure, Day Care		€ 1,124.33	€ 455.00	€ 565.62	€ 117.00
4963	Excision of lesion including scalp rotation flap (I.P.)	No	Independent Procedure, Day Care	Independent Procedure rule does not apply when code 4963 is done in combination with code 4966	€ 541.98	€ 227.00	€ 274.64	€ 88.00
4964	Excision of lesion including cheek rotation flap (I.P.)	No	Independent Procedure, Day Care		€ 822.00	€ 340.00	€ 414.79	€ 88.00

FLAPS AND/ OR GRAFTS

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4966	Excision of lesion including cervicofacial rotation flap (I.P.)	No	Independent Procedure, Day Care	Independent Procedure rule does not apply when code 4966 is done in combination with code 4963	€ 822.00	€ 340.00	€ 414.79	€ 88.00
4967	Excision of lesion including forehead flap (I.P.)	No	Independent Procedure, Day Care		€ 877.33	€ 364.00	€ 421.57	€ 88.00
4968	Excision of lesion including deltopectoral flap (I.P.)	No	Independent Procedure		€ 1,035.41	€ 432.00	€ 470.17	€ 117.00
4969	Excision of lesion including groin flap (I.P.)	No	Independent Procedure		€ 1,035.41	€ 432.00	€ 524.42	€ 117.00
4971	Fasciocutaneous flap, upper limb (I.P.)	No	Independent Procedure		€ 822.00	€ 340.00	€ 421.57	€ 88.00
4972	Fasciocutaneous flap, lower limb (I.P.)	No	Independent Procedure		€ 822.00	€ 340.00	€ 421.57	€ 88.00
4973	Fasciocutaneous flap, trunk (I.P.)	No	Independent Procedure		€ 822.00	€ 340.00	€ 421.57	€ 88.00
4974	Myocutaneous flap, pectoralis	No		Payable in full with primary procedure	€ 762.17	€ 319.00	€ 384.27	€ 88.00
4976	Myocutaneous flap, latissimus dorsi	No		Payable in full with primary procedure	€ 762.17	€ 319.00	€ 389.93	€ 88.00
4977	Myocutaneous flap, latissimus dorsi with serratus and rib	No		Payable in full with primary procedure	€ 822.00	€ 340.00	€ 427.22	€ 88.00
4978	Myocutaneous flap, vertical rectus	No		Payable in full with primary procedure	€ 822.00	€ 340.00	€ 427.22	€ 88.00
4979	Myocutaneous flap, transverse rectus (TRAM)	No		Payable in full with primary procedure	€ 762.17	€ 319.00	€ 378.62	€ 88.00
4981	Myocutaneous flap, tensor fascia lata	No		Payable in full with primary procedure	€ 822.00	€ 340.00	€ 421.57	€ 88.00

GENITALIA

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate

GENITALIA								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4640	Naso lacrimal duct, reconstruction of	No			€ 541.98	€ 227.00	€ 366.19	€ 88.00
4686	Cliteroplasty	No			€ 925.88	€ 386.00	€ 427.22	€ 117.00

HAND									
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES		Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4690	Vaginal reconstruction with skin graft	No				€ 1,096.39	€ 455.00	€ 524.42	€ 117.00
4695	Congenital hand deformities, reconstruction on each hand (per stage)	No				€ 762.17	€ 319.00	€ 384.27	€ 88.00
4700	Congenital hand deformities, moderate repairs on each hand (per stage)	No	Day Care			€ 438.10	€ 183.00	€ 231.70	€ 117.00
4705	Contractures, extensive, straightening of hand and inlay grafts	No				€ 762.17	€ 319.00	€ 384.27	€ 95.00
4710	Contractures, localised, division and graft	No				€ 438.10	€ 183.00	€ 231.70	€ 69.00
4711	Dermofasciectomy, removal of flexor skin, full thickness skin graft including distal or full palm, one finger	No				€ 877.33	€ 364.00	€ 438.53	€ 117.00
4712	Dermofasciectomy, removal of flexor skin, full thickness skin graft including distal or full palm, one finger including simple fasciectomy to another finger	No				€ 1,200.26	€ 500.00	€ 603.54	€ 117.00
4715	Dupuytren's contracture, fasciectomy (one or two fingers)	No	Day Care			€ 651.51	€ 273.00	€ 330.02	€ 88.00
4720	Dupuytren's contracture, fasciectomy (three or more fingers)	No	Day Care			€ 925.88	€ 364.00	€ 463.39	€ 88.00
4721	Dupuytren's contracture, palm and fingers	No	Day Care			€ 925.88	€ 386.00	€ 463.39	€ 88.00
4730	Injury to hand, major, multiple repair of tendons, nerves and skin	No				€ 1,200.26	€ 500.00	€ 603.54	€ 117.00
4735	Injury to hand, moderate, wound repair or graft	No				€ 651.51	€ 273.00	€ 330.02	€ 88.00
4740	Island grafting, for sensory loss, finger and/ or thumb	No				€ 1,200.26	€ 500.00	€ 621.62	€ 117.00
4745	Neoplasm, major excision and repair with tendon grafts and flaps	No				€ 1,315.43	€ 546.00	€ 591.11	€ 117.00
4750	Neoplasm, localised excision and graft	No	Day Care			€ 651.51	€ 273.00	€ 330.02	€ 88.00
4760	Nerve repair, primary, single or multiple	No	Day Care			€ 762.17	€ 319.00	€ 395.58	€ 117.00
4765	Nerve repair in extensively scarred hand	No				€ 1,089.61	€ 455.00	€ 524.42	€ 117.00

HAND								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4770	Opposition strut graft to thumb	No			€ 877.33	€ 364.00	€ 463.39	€ 88.00
4775	Palmar ganglion, compound, synovectomy of	No	Day Care		€ 877.33	€ 364.00	€ 438.53	€ 88.00
4780	Pollicisation (finger replacement of lost thumb)	No			€ 1,424.96	€ 592.00	€ 719.95	€ 225.00
4781	Repair of bifid thumb	No			€ 1,041.06	€ 502.00	€ 542.51	€ 286.00
4782	Toe to hand transfer	No			€ 3,538.69	€ 1,709.00	€ 1,835.48	€ 973.00
4783	Sympathectomy, digital arteries, each digit with magnification	No			€ 791.52	€ 383.00	€ 408.01	€ 214.00
4785	Syndactyly, repair of, single	No			€ 877.33	€ 364.00	€ 438.53	€ 88.00
4790	Syndactyly, repair of, multiple	No			€ 877.33	€ 364.00	€ 438.53	€ 117.00
4795	Tendon grafting, single	No			€ 762.17	€ 319.00	€ 384.27	€ 69.00
4800	Tendon grafting, multiple	No	Day Care		€ 1,089.61	€ 455.00	€ 561.72	€ 95.00
4805	Tendon repair, single	No			€ 651.51	€ 273.00	€ 330.02	€ 69.00
4810	Tendon repair, multiple	No			€ 877.33	€ 364.00	€ 438.53	€ 88.00
4815	Tendon transplants, for restoration of opposition	No			€ 877.33	€ 364.00	€ 438.53	€ 88.00
4820	Tendon transfers for paralysis, multiple	No			€ 1,200.26	€ 500.00	€ 603.54	€ 117.00
4825	Tube pedicle or flap reconstructions, first stage	No			€ 980.08	€ 409.00	€ 493.91	€ 117.00
4830	Tube pedicle or flap reconstructions, second stage	No			€ 822.00	€ 340.00	€ 421.57	€ 117.00

MAXILLA AND MANDIBLE								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4836	Release of syndactyly; toes (I.P.)	No	Independent Procedure		€ 401.97	€ 201.00	€ 238.48	€ 126.00
4845	Facial bone, simple fixation of undisplaced fracture (e.g. jaw sling)	No			€ 329.71	€ 136.00	€ 231.70	€ 69.00
4850	Facial bones, tumours of, major resection and/ or reconstruction	No			€ 1,315.43	€ 546.00	€ 688.30	€ 136.00
4855	Fracture of maxilla or mandible, open reduction and fixation	No			€ 905.29	€ 364.00	€ 452.50	€ 88.00

MAXILLA AND MANDIBLE								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4860	Fracture of maxilla or mandible, fixation of undisplaced	No			€ 559.25	€ 227.00	€ 358.03	€ 88.00
4865	Fracture of maxilla or mandible, malar bone or part of these, reduction without fixation	No			€ 559.25	€ 227.00	€ 289.22	€ 88.00
4870	Hypertelorism correction, sub cranial	No			€ 1,577.55	€ 636.00	€ 849.01	€ 283.00
4875	Mandible, excision of	No			€ 1,124.33	€ 455.00	€ 598.27	€ 136.00
4880	Maxilla or mandible, advancement or recession osteotomy of	No			€ 1,024.13	€ 364.00	€ 598.27	€ 283.00
4881	Maxillary and mandibular osteotomy	No			€ 1,540.27	€ 546.00	€ 773.22	€ 331.00
4882	Lengthening of the mandible by gradual distraction for congenital hemifacial microsomia	Yes			€ 666.44	€ 313.00	€ 346.37	€ 180.00
4883	Surgically assisted rapid maxillary expansion	Yes			€ 666.44	€ 313.00	€ 340.54	€ 175.00
4885	Orbital floor, fracture of, reduction, direct wiring and build up from antrum	No			€ 1,124.33	€ 455.00	€ 598.27	€ 117.00
4890	Orbital floor, secondary bone grafting	No			€ 905.29	€ 364.00	€ 478.16	€ 88.00
4895	Osteomyelitis or abscess of facial bones, operation for	No	Day Care		€ 559.25	€ 227.00	€ 289.22	€ 88.00
4900	Temporo mandibular joint, reduction of dislocation under general anaesthetic	No	Day Care		€ 227.20	€ 91.00	€ 194.76	€ 48.00
4901	Arthroscopy, temporo mandibular joint for release of adhesions or arthroplasty, with or without biopsy (unilateral) (I.P.)	No	Independent Procedure, Day Care		€ 272.80	€ 183.00	€ 204.80	€ 69.00
4902	Arthroscopy, temporo mandibular joint for release of adhesions or arthroplasty, with or without biopsy (bilateral) (I.P.)	No	Independent Procedure, Day Care		€ 452.06	€ 183.00	€ 277.56	€ 69.00
444476	Combined mastopexy to contralateral breast including full thickness graft from other areas and mastopexy including full thickness graft from other areas post mastectomy at same session (I.P.)	No	Independent Procedure	Post Mastectomy only	€ 1,980.68	€ 650.00	€ 991.30	€ 250.00

NOSE								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4905	Temporo mandibular joint, condylectomy for ankylosis	No			€ 762.17	€ 319.00	€ 688.30	€ 225.00
4910	Bone graft	No			€ 980.08	€ 409.00	€ 493.91	€ 88.00
4915	Nasal tip deformities, correction of	No			€ 762.17	€ 319.00	€ 384.27	€ 69.00
4920	Fracture of nose, digital closed reduction	No	Side Room		€ 109.53	€ 46.00	€ 186.49	€ 69.00

NOSE								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4925	Fracture of nose, instrumental closed reduction	No	Day Care		€ 163.72	€ 69.00	€ 188.75	€ 69.00
4926	Fracture of nose, instrumental closed reduction with plaster of paris fixation	No	Day Care		€ 227.20	€ 91.00	€ 194.76	€ 69.00
4927	Fracture of nose, instrumental closed reduction with reduction of septum and plaster of paris fixation	No	Day Care		€ 340.21	€ 136.00	€ 194.76	€ 69.00
4930	Fracture of nose, open reduction	No	Day Care		€ 227.20	€ 91.00	€ 239.07	€ 69.00
4939	Excision of benign or malignant lesion(s), any area; adjacent tissue transfers or rearrangement, for wounds requiring extensive (>3cm) undermining of skin edges for effective closure	No	Day Care	Procedure codes 4937, 4938, 4939, 4941, 4942, 4943 and 4946 are only payable to consultants Plastic Surgeons	€ 651.51	€ 248.00	€ 384.27	€ 149.00
4944	Excision of pressure sore and myocutaneous flap	No		Payable in full with primary procedure	€ 822.00	€ 396.00	€ 421.57	€ 223.00
4949	Excision of pressure sore and local cutaneous flap (I.P.)	No	Independent Procedure		€ 541.98	€ 264.00	€ 274.64	€ 139.00
4952	Excision or debridement of pressure sore and split skin graft (I.P.)	No	Independent Procedure		€ 438.10	€ 212.00	€ 231.70	€ 122.00
5630	Repair of cirroid aneurysm of the scalp	No			€ 1,074.22	€ 455.00	€ 521.30	€ 88.00

OTHER RECONSTRUCTIVE PROCEDURES								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4543	Skin grafting of wound greater than 18% of body surface	No			€ 1,223.98	€ 590.00	€ 628.40	€ 332.00
4544	Keloids and hypertrophic scars intralesional injection of triamcinolone, extensive, seven or more lesions or one lesion larger than 5 sq.cm where general anaesthetic is medically necessary; by consultant Plastic Surgeon registered with Irish Life Health only (I.P.)	No	Independent Procedure, Side Room		€ 167.39	€ 94.00		
4835	Tube pedicle or flap reconstructions, final stage	No			€ 1,089.61	€ 455.00	€ 548.16	€ 88.00
4946	Skin graft (pinch, split thickness, epidermal, dermal or tissue culture or free flap excised from a distant site and harvested as a graft from non adjacent skin) for repair when direct wound closure or adjacent tissue transfer is not possible; with code 4941. (List separately in addition to code for primary procedure. Benefit shown is payable in full with code for the primary procedure) (see procedure code 4946)	No		Procedure codes 4937, 4938, 4939, 4941, 4942, 4943 and 4946 are only payable to consultants Plastic Surgeons	€ 414.39	€ 158.00	€ 244.13	€ 95.00
4982	Myocutaneous flap, gluteal	No		Payable in full with primary procedure	€ 822.00	€ 340.00	€ 421.57	€ 88.00

OTHER RECONSTRUCTIVE PROCEDURES

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4983	Botox for hyperhidrosis (I.P.)	No	Independent Procedure	As a result of a positive Bromide Iodine Starch Test or following a referral from a consultant having failed a prescribed course of topical treatment (maximum 2 per annum)	€ 97.10	€ 40.00		
4999	Replantation of thumb including carpometacarpal joint to metacarpophalangeal joint, complete amputation, with or without microvascular anastomosis	No			€ 2,363.26	€ 1,143.00	€ 1,225.16	€ 651.00
44778	Flap harvest for bi-lateral breast reconstruction with free flap, post-mastectomy DIEP (deep inferior epigastric perforators) - dual surgeons (I.P.)	Yes	Independent Procedure	Paid at 100% of rate in conjunction with breast surgery code and only where performed in an ILH approved private hospital, with an approved ICU as listed by Irish Life Health or a HSE level 4 Hospital, by a consultant who is credentialed to perform these procedures	€ 2,100.00	€ this procedure can	€ 1,266.66	€ 625.00
669911	Eyelid, reconstruction of greater than 66% of surface area	No	Day Care	Documentation required	€ 1,281.62	€ 455.00	€ 682.24	€ 160.00

REPLANTATION

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4990	Major degloving injuries of limbs, excision and graft of	No			€ 1,315.43	€ 546.00	€ 658.92	€ 136.00
4991	Replantation, per digit	No			€ 1,261.23	€ 523.00	€ 634.05	€ 117.00
4992	Replantation, hand (mid palm)	No			€ 1,857.41	€ 773.00	€ 964.08	€ 225.00
4993	Replantation, hand (wrist)	No			€ 1,584.17	€ 660.00	€ 822.80	€ 225.00
4994	Replantation, forearm	No			€ 1,747.89	€ 728.00	€ 908.70	€ 225.00
4996	Replantation, foot	No			€ 1,747.89	€ 728.00	€ 908.70	€ 225.00
4997	Replantation, scalp following major trauma only	No			€ 1,261.23	€ 523.00	€ 652.14	€ 117.00
4998	Replantation, ear	No			€ 1,261.23	€ 523.00	€ 652.14	€ 117.00

TISSUE EXPANDERS

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
4547	Excision, excessive skin and subcutaneous tissue (includes lipectomy); abdomen; infraumbilical panniculectomy	Yes		Benefit is payable for procedure code 4547 only in the following circumstances: Where the panniculus hangs below the level of the pubis; and the medical records document that the panniculus causes chronic intertrigo (dermatitis occurring on opposed surfaces of the skin, skin irritation, infection or chafing) that consistently recurs over 3 months while receiving appropriate medical therapy, or remains refractory to appropriate medical therapy over a period of 3 months Pre certification required	€ 1,309.79	€ 659.00	€ 914.35	€ 412.00
4551	Insertion of tissue expanders (other than breast) includes subsequent expansion(s)	No			€ 1,132.51	€ 409.00	€ 603.54	€ 88.00
4552	Removal of expander (other than breast)	No			€ 317.29	€ 174.00	€ 212.48	€ 126.00