

Consultant Private Room Fees And Surgeries

Ground Rules

1. Private Rooms Technical Benefit

Irish Life Health are delighted to offer a “Private Room Technical Fee” to fully participating Consultants for procedures carried out in their Private Rooms. This is to recognise where Consultants may have invested in additional equipment & facilities, and to provide an enhanced experience to their patients by avoiding admission into a hospital setting.

The Private Room Technical Fees listed in Schedule 1 are payable in conjunction with selected procedures as outlined in Schedule 2. Please note that all payment rules, as set out in respect of each procedure code in the Schedule of Benefits for Professional fees, will apply.

Private Room Technical Fee benefits are only payable where no hospital or other bills are involved/ received, and only where the Consultant has performed the procedure(s) in their own rooms/suite (based on the Consultant's decision regarding appropriateness and safety). Where the Consultant opts to undertake the procedure in the hospital, then the hospital billing and claim submission process remains in place. The Private Room Technical Fee benefit is to cover technical charges arising for patients being treated in the Consultant's rooms. Acceptance of these fees are full and final settlement of any technical charges arising for the procedure.

Procedures where the Private Rooms Technical Fee benefit may be claimed are subject to change based on input and feedback from Consultants. Please email consultantcontracts@irishlifehealth.ie with any queries and/or recommendations for review of these procedures.

How to Claim

The Private Room Technical Fee benefit may be claimed in addition to the professional fee of the relevant procedure code and will be paid at 100% (multiple procedure rule will not apply).

Consultants are required to submit their claim form, billing/invoicing both the “Private Rooms Technical Fee” code specific to their discipline (see Schedule 1) **and** the corresponding procedure code (see Schedule 2).

Please note there is Higher/Minor technical rate associated with certain procedures, as highlighted in Schedule 2.

Schedule 1.

Private Room Technical Fee codes per Discipline

Code	Description	Participating Consultant Surgeon/ Physician Rate
936699	Consultant Cardiologist Private Rooms Technical Fee	€94
946699	Consultant Ear Nose Throat Surgeon Private Rooms Technical Fee	€94
456699	Consultant General Surgeon Private Rooms Technical Fee	€94
596699	Consultant Gynaecologist Private Rooms Technical Fee	€94
441598	Consultant in Medical Services Private Rooms Technical Fee - Minor Rate	€43
441599	Consultant in Medical Services Private Rooms Technical Fee	€94
666599	Consultant Ophthalmologist Private Rooms Technical Fee	€94
276699	Consultant Orthopaedic Surgeon Private Rooms Technical Fee	€94
636699	Consultant in Pain Management Private Rooms Technical Fee	€94
856599	Consultant Plastic & Reconstructive Surgeon Private Rooms Technical Fee	€94
856598	Consultant Plastic & Reconstructive Surgeon Private Rooms Technical Fee – Higher Rate	€135
811599	Consultant Dermatologist Private Rooms Technical Fee	€94
811598	Consultant Dermatologist Private Rooms Technical Fee – Minor Rate	€43
816699	Consultant Dermatologist Private Rooms Technical Fee – Higher Rate	€135
906699	Consultant Urologist Private Rooms Technical Fee	€94
376699	Consultant Vascular Surgeon Private Rooms Technical Fee	€94
637699	Consultant Neurology Private Rooms Technical Fee	€94

Schedule 2.

Procedure codes payable with Private Rooms Technical Benefit.

Please note:

- > *Higher (€135) or Minor (€42) Technical Fee Rates are applicable to selected procedures (see far right column).*
- > *The codes listed in Schedule 2 are grouped by discipline for ease of use, however, where clinically appropriate, Consultants may claim for codes listed outside of their discipline.*

Code	Description	Disciplines	Higher/Minor Rate Applicable
5021	Major consultant consultation including tilt table testing, alone or in combination with the administration of provocative agents (e.g. Isoproterenol), with continuous ECG monitoring and intermittent blood pressure monitoring for the evaluation of cardiac function in patients with recurrent unexplained neurocardiogenic syncope who have an inconclusive history and physical examination, as well as negative non-invasive tests of cardiac structure and function (not payable for any other indication except as stated above)	Cardiology	
5036	Trans-thoracic echocardiography for congenital or acquired cardiac anomalies in children under 16; limited study for patients where the cardiac anatomy is known (e.g. follow up of valve stenosis) or in the evaluation or follow up of patients with predominantly non-cardiac problems (e.g. pre or post cancer chemotherapy, severe renal disease, overwhelming sepsis), where the assessment of myocardial and valvular function or exclusion of pericardial effusion is required	Cardiology	
5037	Trans-thoracic echocardiography, initial assessment of an infant or child, for the diagnosis or exclusion of complex congenital or acquired cardiac anomalies or where a detailed follow up examination is indicated. Also for adults with congenital heart disease assessed by a consultant Paediatric Cardiologist	Cardiology	

Code	Description	Disciplines	Higher/Minor Rate Applicable
5109	Echocardiography, transoesophageal, real-time with image documentation (2D) (with or without M-mode recording), including probe placement, image acquisition, interpretation and report	Cardiology	
5132	Foetal echocardiography for the diagnosis or exclusion of cardiac anomalies in the foetus, including detailed segmental analysis, assessment of visceral situs (2D), M -mode, Doppler (PW & colour flow), assessment of myocardial function, regurgitation - including image acquisition, interpretation and report	Cardiology	
1670	Excision/ repair external ear; soft tissue lesion(s), polyp/ polyps or repair of split ear lobe(s) or other trauma, one or both ears	Ear, Nose and Throat	
1671	Debridement of ear canal and micro inspection of tympanic membrane unilateral or bilateral, requiring the use of an operating microscope and a hospital operating theatre e.g. in chronic otitis media or keratosis obturans (not for routine syringing, cleaning or the removal of impacted cerumen) (I.P.)	Ear, Nose and Throat	
1675	Drainage of external ear, abscess or haematoma	Ear, Nose and Throat	
1700	Foreign body, removal from ear, under general anaesthetic (I.P.)	Ear, Nose and Throat	
1752	Pinna, partial excision with flap reconstruction	Ear, Nose and Throat	
1800	Epistaxis - anterior packing and/ or cautery (I.P.)	Ear, Nose and Throat	
1805	Epistaxis - posterior packing and/ or cautery (I.P.)	Ear, Nose and Throat	
1820	Polypectomy, single (I.P.)	Ear, Nose and Throat	
1904	Nasal/ sinus endoscopy (using an endoscope), diagnostic, unilateral or bilateral (this code is not payable for planned routine follow-ups to any other ENT procedure e.g. for splint, removal, washout, healing check etc.) (I.P.)	Ear, Nose and Throat	

Code	Description	Disciplines	Higher/Minor Rate Applicable
1990	Cauterisation and/ or ablation, mucosa of turbinates, unilateral or bilateral, any method, superficial (I.P.)	Ear, Nose and Throat	
2030	Laryngoscopy, flexible/ rigid under topical anaesthesia (I.P.)	Ear, Nose and Throat	
2058	Botulinum toxin injections for laryngeal dysphonia	Ear, Nose and Throat	
2113	Full pulmonary function studies for the diagnosis and assessment of obstructive or restrictive lung disease (I.P.)	Ear, Nose and Throat	
2122	Initial nasal CPAP titration for sleep apnoea together with a second nasal CPAP titration procedure performed for sleep apnoea during the same admission (I.P.)	Ear, Nose and Throat	
2144	Nasal CPAP titration for sleep apnoea (I.P.)	Ear, Nose and Throat	
2148	Multiple Sleep Latency Testing (MSLT) or maintenance of wakefulness testing, recording, analysis and interpretation of physiological measurements of sleep during multiple trials to assess sleepiness	Ear, Nose and Throat	
309012	Debridement of post-mastoidectomy cavity and micro-inspection of tympanic membrane, unilateral and/ or bilateral, in a hospital theatre via microscope	Ear, Nose and Throat	
50	Paracentesis abdominis	General Surgery	
192	Capsule endoscopy	General Surgery	
461	Reduction of prolapsed colostomy stoma	General Surgery	
488	Ano-rectal manometry	General Surgery	
506	Haemorrhoids, injection and/ or banding (I.P.)	General Surgery	
515	Imperforate anus, simple incision	General Surgery	
530	Proctoscopy or sigmoidoscopy (I.P.)	General Surgery	
535	Proctoscopy or sigmoidoscopy, with biopsy (I.P.)	General Surgery	
536	Diagnostic flexible sigmoidoscopy and biopsies (I.P.)	General Surgery	

Code	Description	Disciplines	Higher/Minor Rate Applicable
1046	Excision of lesion of mucosa and submucosa, vestibule of mouth, with simple repair (I.P.)	General Surgery	
1047	Excision of lesion of mucosa and submucosa, vestibule of mouth, complex, with or without excision of underlying muscle (I.P.)	General Surgery	
1055	Cyst or benign tumour on lip, excision of (I.P.)	General Surgery	
1058	Epithelioma of lip, lip shave	General Surgery	
1095	Tuberculous caseous glands or sinuses, curettage of	General Surgery	
1100	Laceration of palate, repair of	General Surgery	
1115	Abscess of salivary gland, incision and drainage	General Surgery	
1125	Parotid or submandibular duct, dilatation of	General Surgery	
1140	Salivary calculus, removal of	General Surgery	
1152	Thyroid cyst(s) aspiration/ fine needle biopsy (I.P.)	General Surgery	
1170	Frenectomy (tongue tie)	General Surgery	
1180	Growths of tongue, diathermy to	General Surgery	
1185	Excision biopsy, oral cavity (I.P.)	General Surgery	
1195	Percutaneous core needle biopsy of breast with or without ultrasound guidance (I.P.)	General Surgery	
1310	Open superficial lymph node biopsy	General Surgery	
1311	Biopsy or excision of lymph node(s); by needle, superficial (e.g. cervical, inguinal, axillary)	General Surgery	
1320	Axillary or inguinal lymph nodes, incision of abscess	General Surgery	
1505	Abscess, cyst or tumour, aspiration of (I.P.)	General Surgery	
1525	Foreign body, removal of	General Surgery	
1552	Surgical excision of benign lesion or lesions from body other than face, ear, neck and/ or genitalia (includes sebaceous cysts) (I.P.)	General Surgery	
1554	Surgical excision of benign lesion or lesions of face, neck, ear or genitalia (includes sebaceous cysts) (I.P.)	General Surgery	

Code	Description	Disciplines	Higher/Minor Rate Applicable
3120	Nail, removal of	General Surgery	
3155	Whitlow, incision and drainage	General Surgery	
4155	Avulsion of nail plate, partial or complete, simple	General Surgery	
4160	Excision of nail and nail matrix, partial or complete (e.g. ingrown or deformed nail), for permanent removal	General Surgery	
5743	Botulinum toxin injection for treatment of cervical dystonia	General Surgery	
494351	Incision and drainage of axillary or inguinal lymph node abscess	General Surgery	
2145	Cervix, biopsy of (I.P.)	Gynaecology	
2160	Cervix, local excision of lesion (I.P.)	Gynaecology	
2170	Cervix, suture of (I.P.)	Gynaecology	
2171	Cervical cerclage (I.P.)	Gynaecology	
2172	Cerclage of cervix, during pregnancy through abdominal incision (I.P.)	Gynaecology	
2175	Cervix, cautery of (I.P.)	Gynaecology	
2181	Colposcopy (I.P.)	Gynaecology	
2182	Colposcopy with Lletz procedure for lesion removal and/ or laser therapy (I.P.)	Gynaecology	
2183	Colposcopy and diagnostic biopsy (I.P.)	Gynaecology	
2184	Colposcopy and therapeutic loop electrode biopsy(s) of the cervix (I.P.)	Gynaecology	
2209	Chorionic villus sampling with ultrasound guidance	Gynaecology	
2211	Amniocentesis, with ultrasound guidance	Gynaecology	
2216	Advanced foetal ultrasound, real time with image documentation, detailed foetal and maternal anatomical examination, only payable following referral by the initial Obstetrician for a documented suspected abnormality identified by a prior ultrasound (I.P.)	Gynaecology	

Code	Description	Disciplines	Higher/Minor Rate Applicable
2225	Dilatation and curettage (diagnostic or therapeutic) (I.P.)	Gynaecology	
2246	Hysteroscopy with insertion of intrauterine device for menorrhagia (not for contraceptive purposes) (I.P.)	Gynaecology	
2247	Insertion of intrauterine device for menorrhagia, not for contraceptive purposes (I.P.)	Gynaecology	
2377	Endoscopic periurethral injection of bulking agents that are approved by FDA for urinary incontinence (I.P.)	Gynaecology	
2385	Bartholin's gland cyst, excision of	Gynaecology	
2390	Bartholin's or Skene's gland, abscess of, incision and drainage (I.P.)	Gynaecology	
2395	Caruncle, vulvovaginal, removal of (I.P.)	Gynaecology	
2425	Cysts or simple tumours of the vulva or vagina, excision of	Gynaecology	
2430	Hymenotomy (I.P.)	Gynaecology	
2435	Hymenectomy (I.P.)	Gynaecology	
598513	Termination by one of more vaginal suppositories (including delivery of foetus and secundines) (I.P.)	Gynaecology	
1309	Fine needle aspiration (FNA), not otherwise specified in this Schedule, with or without preparation of smears; superficial or deep tissue with or without radiological guidance	Medical Services	
1641	Therapeutic phlebotomy, by the consultant physician or under the consultant physician supervision, includes appropriate advice to the patient as necessary, including file report or report to the referring doctor.	Medical Services	Minor Rate only
1611	Intravenous infusion of Fabrazyme for patients with a confirmed diagnosis of Fabry's disease	Medical Services	

Code	Description	Disciplines	Higher/Minor Rate Applicable
1664	Insulin stress test (IST) to include initial consultation for a new patient or major reassessment of an established patient, in addition intravenous administration of insulin, sampling for basal level setting and all necessary sampling and monitoring of the patient during the procedure (I.P.)	Medical Services	
2490	Conjunctival flap	Ophthalmology	
2500	Conjunctival cyst/ granuloma, one or more excision of	Ophthalmology	
2505	Foreign body, removal of, from conjunctiva	Ophthalmology	
2510	Pterygium removal	Ophthalmology	
2520	Conjunctival wounds, repair	Ophthalmology	
2521	Symblepharon division	Ophthalmology	
2527	Conjunctival biopsy	Ophthalmology	
2531	Removal of sutures (late stage) post corneal grafting; corneal/ sclera	Ophthalmology	
2535	Corneal surface removed and EDTA application	Ophthalmology	
2540	Corneal tattooing	Ophthalmology	
2546	Corneal scraping	Ophthalmology	
2547	Corneal biopsy	Ophthalmology	
2548	Ulcer/ recurrent erosion, surgical treatment/ cautery with or without pricking, with or without debridement, with or without cryotherapy, one or more treatments, per episode of illness	Ophthalmology	
2575	Foreign body, removal of, from cornea	Ophthalmology	
2579	Excimer laser therapy for the correction of corneal diseases e.g. corneal dystrophy, epithelial membrane dystrophy, irregular corneal surfaces due to Salzmann's nodular degeneration or keratoconus nodules, or post traumatic corneal scars and opacities or recurrent corneal erosions. Not for the correction of refractive errors (LASIK), the treatment of infectious keratitis or for the correction of post surgical corneal scars that arise as a result of surgery for which Irish Life Health benefit is not payable	Ophthalmology	

Code	Description	Disciplines	Higher/Minor Rate Applicable
2591	Botulinum injection for blepharospasm or to induce ptosis (I.P.)	Ophthalmology	
2592	Repair of ectropion; suture or thermo cauterization	Ophthalmology	
2601	Repair of entropion; suture or thermo cauterization	Ophthalmology	
2605	Epilation, trichiasis, correction of, by other than forceps (e.g. electrosurgery, cryotherapy, laser surgery), unilateral or bilateral. (I.P.)	Ophthalmology	
2610	Injury to eyelid, repair (superficial)	Ophthalmology	
2621	Excision of chalazion, papilloma, dermoid or other cyst or lesion, single, involving skin, lid margin, tarsus, and/ or palpebral conjunctiva (I.P.)	Ophthalmology	
2622	Excision of chalazions, papilloma's, dermoids or other cysts or lesions, one or both eyelids, involving skin, lid margin, tarsus and/ or palpebral conjunctiva (I.P.)	Ophthalmology	
2626	Canthotomy (I.P.)	Ophthalmology	
2648	YAG laser capsulotomy, post cataract surgery, one or more treatments (details of previous cataract surgery must be provided on the claim form)	Ophthalmology	
2649	Bilateral YAG laser capsulotomy, post cataract surgery, one or more treatments (details of previous cataract surgery must be provided on the claim form)	Ophthalmology	
2756	Removal of D.C.R. tube	Ophthalmology	
2760	Lacrimal abscess, (dacrocystitis) incision	Ophthalmology	
2761	Lacrimal sac, syringing and probing, unilateral or bilateral (I.P.)	Ophthalmology	
2764	Probing of nasolacrimal duct, with or without irrigation; with insertion of tube or stent (I.P.)	Ophthalmology	
2766	Punctal closure with cautery or controller	Ophthalmology	
2768	3 snip operation of lacrimal punctum	Ophthalmology	
2769	Correction of everted punctum: cautery only	Ophthalmology	

Code	Description	Disciplines	Higher/Minor Rate Applicable
2773	Lacrimal canaliculi and sac, probing with or without syringing, one or both eyes (I.P.)	Ophthalmology	
2775	Lacrimal sac, syringing (I.P.)	Ophthalmology	
2872	Post operative adjustment(s) of suture(s)	Ophthalmology	
2873	Botulinum toxin injection to extraocular muscles	Ophthalmology	
2874	Muscle biopsy (I.P.)	Ophthalmology	
2875	Retrolbulbar, orbital floor, subconjunctival, subtenons and facial nerve injections (I.P.)	Ophthalmology	
2880	Examination of eye under general anaesthetic (I.P.)	Ophthalmology	
2926	Fluorescein angiography (I.P.)	Ophthalmology	
2927	Tensilon (Edrophonium) test	Ophthalmology	
669901	Dermatochalasis causing visual field obstruction (not cosmetic)	Ophthalmology	
1385	Muscle biopsy	Orthopaedic Procedures	
1390	Nerve biopsy	Orthopaedic Procedures	
1425	Tenotomy	Orthopaedic Procedures	
3115	Manipulation for treatment of dislocation of metacarpophalangeal joint (I.P.)	Orthopaedic Procedures	
3125	Nails, removal of all	Orthopaedic Procedures	
3126	Debridement and repair of nail bed, for simple crush injuries	Orthopaedic Procedures	
3130	Application of plaster of paris casts as a separate procedure not associated with concurrent surgery (I.P.)	Orthopaedic Procedures	
3184	Injection, therapeutic (e.g. local anaesthetic corticosteroid for the relief of symptoms of carpal tunnel syndrome) under ultrasound guidance (I.P.)	Orthopaedic Procedures	

Code	Description	Disciplines	Higher/Minor Rate Applicable
3230	Nerve block for pain control, wrist joint	Orthopaedic Procedures	
3250	Sympathetic block	Orthopaedic Procedures	
3315	Drainage of elbow joint	Orthopaedic Procedures	
3325	Fracture forearm (greenstick), closed reduction and plaster of paris	Orthopaedic Procedures	
3365	Closed treatment of elbow dislocation (I.P.)	Orthopaedic Procedures	
3610	Aspiration, sacro iliac joint	Orthopaedic Procedures	
3615	Biopsy of sacro iliac joint region	Orthopaedic Procedures	
3620	Injection of sacro iliac joint region (I.P.)	Orthopaedic Procedures	
3817	Removal of fixator device, tibia	Orthopaedic Procedures	
3985	Synovial biopsy, ankle	Orthopaedic Procedures	
4025	Manipulation and plaster fixation	Orthopaedic Procedures	
4030	Manipulation and strapping	Orthopaedic Procedures	
4107	Percutaneous skeletal fixation of metatarsal fracture with manipulation	Orthopaedic Procedures	
4161	Initial pledget insertion for infected ingrowing toe nail, under general anaesthetic, in children under 16 years of age (I.P.)	Orthopaedic Procedures	
4263	Chemodenervation of muscle(s); extremity(ies) and/ or trunk muscle(s) (e.g. for dystonia, cerebral palsy, multiple sclerosis)	Orthopaedic Procedures	
4320	Removal of plates, pins, screws; superficial (I.P.)	Orthopaedic Procedures	

Code	Description	Disciplines	Higher/Minor Rate Applicable
4321	Arthrocentesis, one or more injections at the same session, children aged 12 to 16; small, intermediate or large joint (I.P.)	Orthopaedic Procedures	
4322	Arthrocentesis, children aged under 12; less than 4 injections at the same session to knee, wrist, elbow, ankle and/ or shoulder joint (I.P.)	Orthopaedic Procedures	
4323	Arthrocentesis, children aged under 12; 4 or more injections at the same session to knee, wrist, elbow, ankle and/ or shoulder joint (I.P.)	Orthopaedic Procedures	
4324	Arthrocentesis, children aged under 12; less than 4 injections at the same session, using image guidance, to hip, finger and/ or toe joint (I.P.)	Orthopaedic Procedures	
4326	Arthrocentesis, children aged under 12; 4 or more injections at the same session, using image guidance, to hip, finger and/ or toe joints (I.P.)	Orthopaedic Procedures	
4331	Injection, tendon sheath, ligament, or ganglion cyst (I.P.)	Orthopaedic Procedures	
275850	Extraction and reinfusion autologous (platelet rich plasma) anti-inflammatory injection for early knee mild to moderate osteoarthritis - Zimmer NStride	Orthopaedic Procedures	
1220	Botulinum injection for headaches and migraine	Pain Management	
3540	Epidural injection (I.P.)	Pain Management	
3541	Caudal epidural (I.P.)	Pain Management	
3542	Epidural injection, of anaesthetic substances and/ or therapeutic substances, diagnostic or therapeutic under radiological guidance one or more levels at the same session (I.P.)	Pain Management	
4332	Arthrocentesis, aspiration and/ or injection; small joint, bursa or ganglion cyst (e.g. fingers, toes) (I.P.)	Pain Management	

Code	Description	Disciplines	Higher/Minor Rate Applicable
4333	Arthrocentesis, aspiration and/ or injection; intermediate joint, bursa or ganglion cyst (e.g. temporomandibular acromioclavicular, wrist, elbow or ankle, olecranon bursa) (I.P.)	Pain Management	
4334	Arthrocentesis, aspiration and/ or injection; major joint or bursa (e.g. shoulder, hip, knee joint, subacromial bursa) (I.P.)	Pain Management	
5038	Refilling and maintenance of implantable pump or reservoir including access to pump port (I.P.)	Pain Management	
5586	Destruction by neurolytic agent (chemodenervation of muscle endplate); muscles enervated by facial nerve (e.g. for blepharospasm, hemifacial spasm)	Pain Management	
5614	Peripheral nerve lesioning including pulsed radiofrequency or electrical stimulation (I.P.)	Pain Management	
5615	Peripheral nerve block for pain control using nerve stimulator or ultrasound guidance (I.P.)	Pain Management	
5620	Sympathetic block, under image guidance (I.P.)	Pain Management	
5624	Injection, anaesthetic agent, intercostal nerve, single (I.P.)	Pain Management	
5625	Injection, anaesthetic agent, intercostal nerve, multiple, regional block (I.P.)	Pain Management	
5880	Electromyography (EMG)	Pain Management	
5881	Electromyography (EMG) study, rectal mucosal sensitivity testing	Pain Management	
174332	Arthrocentesis, aspiration and/ or injection; small joint, bursa or ganglion cyst (e.g. fingers, toes) (I.P.) - 2 aspirations / injections in same episode"	Pain Management	
174334	Arthrocentesis, aspiration and/ or injection; major joint or bursa (e.g. shoulder, hip, knee joint, subacromial bursa) (I.P.) - 2 aspirations / injections in same episode	Pain Management	

Code	Description	Disciplines	Higher/Minor Rate Applicable
174335	Arthrocentesis, aspiration and/ or injection; major joint or bursa (e.g. shoulder, hip, knee joint, subacromial bursa) (I.P.) - 3 or more aspirations / injections in same episode	Pain Management	
304332	Arthrocentesis, aspiration and/ or injection; small joint, bursa or ganglion cyst (e.g. fingers, toes) , including ultrasound guidance (I.P.)	Pain Management	
304333	Arthrocentesis, aspiration and/ or injection; intermediate joint, bursa or ganglion cyst (e.g. temporomandibular acromioclavicular, wrist, elbow or ankle, olecranon bursa) including ultrasound guidance (I.P.)	Pain Management	
304334	Arthrocentesis, aspiration and/ or injection; major joint or bursa (e.g. shoulder, hip, knee joint, subacromial bursa) including ultrasound guidance (I.P.)	Pain Management	
4963	Excision of lesion including scalp rotation flap (I.P.)	Plastic and Reconstructive Surgery	Higher Rate
4964	Excision of lesion including cheek rotation flap (I.P.)	Plastic and Reconstructive Surgery	Higher Rate
4966	Excision of lesion including cervicofacial rotation flap (I.P.)	Plastic and Reconstructive Surgery	Higher Rate
4967	Excision of lesion including forehead flap (I.P.)	Plastic and Reconstructive Surgery	Higher Rate
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.)	Plastic and Reconstructive Surgery	Higher Rate
4415	Adjustment of lip margin	Plastic and Reconstructive Surgery	
4420	Adjustment of scars, secondary	Plastic and Reconstructive Surgery	

Code	Description	Disciplines	Higher/Minor Rate Applicable
4494	Wedge excision of lower lip to restore oral continence in the presence of facial palsy	Plastic and Reconstructive Surgery	
4504	Nipple - areola tattooing performed by a consultant (one or more visits)	Plastic and Reconstructive Surgery	
4538	Treatment of superficial wound dehiscence; simple closure with or without packing (single layer closure)	Plastic and Reconstructive Surgery	
4544	Keloids and hypertrophic scars intralesional injection of triamcinolone, extensive, seven or more lesions or one lesion larger than 5 sq.cm (I.P.)	Plastic and Reconstructive Surgery	
4555	Accessory auricles, removal	Plastic and Reconstructive Surgery	
4560	Epithelioma of ear, excision and reconstruction, lobule placement	Plastic and Reconstructive Surgery	
4620	Eyelid, inlay grafts (one lid)	Plastic and Reconstructive Surgery	
4920	Fracture of nose, digital closed reduction	Plastic and Reconstructive Surgery	
4925	Fracture of nose, instrumental closed reduction	Plastic and Reconstructive Surgery	
4926	Fracture of nose, instrumental closed reduction with plaster of paris fixation	Plastic and Reconstructive Surgery	
4927	Fracture of nose, instrumental closed reduction with reduction of septum and plaster of paris fixation	Plastic and Reconstructive Surgery	

Code	Description	Disciplines	Higher/Minor Rate Applicable
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	Plastic and Reconstructive Surgery	
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	Plastic and Reconstructive Surgery	
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	Plastic and Reconstructive Surgery	
4983	Botulinum toxin injections for hyperhidrosis (I.P.)	Plastic and Reconstructive Surgery	
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.)	Plastic and Reconstructive Surgery	
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.)	Plastic and Reconstructive Surgery	
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.)	Plastic and Reconstructive Surgery	
444546	Enucleation or excision of lipoma (I.P.)	Plastic and Reconstructive Surgery	
1551	Malignant melanoma, wide excisional biopsy with flap or graft repair	Dermatology – Skin & Subcutaneous Tissues	Higher Rate

Code	Description	Disciplines	Higher/Minor Rate Applicable
1576	Basal cell carcinoma/ squamous cell carcinoma/ non melanoma, excision and graft or local flap	Dermatology – Skin & Subcutaneous Tissues	Higher Rate
1516	Destruction by cryotherapy or diathermy of actinic keratosis or warts, with or without surgical curettement - (initial session only) (I.P.)	Dermatology – Skin & Subcutaneous Tissues	Minor Rate only
1517	Destruction by cryotherapy or diathermy of actinic keratosis or warts, with or without surgical curettement - (subsequent sessions, per session fee)	Dermatology – Skin & Subcutaneous Tissues	Minor Rate only
1507	Angioma of skin and subcutaneous tissue or mucous surfaces, excision and repair of	Dermatology – Skin & Subcutaneous Tissues	
1509	Biopsy of skin, subcutaneous tissue and/ or mucous membrane, any method (e.g. punch, incision or shave), including simple closure; single lesion (I.P.)	Dermatology – Skin & Subcutaneous Tissues	
1531	Biopsies of the skin, subcutaneous tissue and/ or mucous membrane including simple closure (I.P.) (the areas biopsied must be specified on the claim form)	Dermatology – Skin & Subcutaneous Tissues	
1540	Skin abscess, (superficial) incision and drainage of (I.P.)	Dermatology – Skin & Subcutaneous Tissues	
1546	Enucleation or excision of lipoma	Dermatology – Skin & Subcutaneous Tissues	
1550	Malignant melanoma, wide excisional biopsy	Dermatology – Skin & Subcutaneous Tissues	

Code	Description	Disciplines	Higher/Minor Rate Applicable
1560	Incision and drainage of pilonidal abscess	Dermatology – Skin & Subcutaneous Tissues	
1575	Basal cell carcinoma/ squamous cell carcinoma/ non melanoma - simple excision	Dermatology – Skin & Subcutaneous Tissues	
1578	Wounds or ulcers requiring debridement when it is medically necessary to perform the procedure under general anaesthetic (I.P.)	Dermatology – Skin & Subcutaneous Tissues	
1591	Hydradenitis suppurativa, excision and suture	Dermatology – Skin & Subcutaneous Tissues	
1601	Wounds up to 2.5 cm in total length, suture or staple of lacerated or torn tissue, single or multi layered closure with or without irrigation or debridement (I.P.)	Dermatology – Skin & Subcutaneous Tissues	
1602	Wounds from 2.6 cm to 7.5 cm in total length, suture or staple of lacerated or torn tissue, single or multi layered closure with or without irrigation or debridement (I.P.)	Dermatology – Skin & Subcutaneous Tissues	
1603	Wounds greater than 7.5cm in total length, suture or staple of lacerated or torn tissue, single or multi layered closure with or without irrigation or debridement (I.P.)	Dermatology – Skin & Subcutaneous Tissues	
4210	Plantar warts, complete surgical excision, one or more (not local application, cryotherapy or curettage etc.)	Dermatology – Skin & Subcutaneous Tissues	Minor Rate only
4281	Bone marrow aspiration	Dermatology – Skin & Subcutaneous Tissues	

Code	Description	Disciplines	Higher/Minor Rate Applicable
4282	Bone marrow biopsy	Dermatology – Skin & Subcutaneous Tissues	
4287	Bone marrow aspiration and biopsy	Dermatology – Skin & Subcutaneous Tissues	
4546	Keloids and hypertrophic scars (I.P.)	Dermatology – Skin & Subcutaneous Tissues	
49371	Excision of benign or malignant lesion(s), any area; adjacent tissue transfers or rearrangement, 4 sq. cm or less (I.P.)	Dermatology – Skin & Subcutaneous Tissues	
158711	Laser treatment to port wine stains only, one to five sessions - per session fee	Dermatology – Skin & Subcutaneous Tissues	
158712	Laser treatment to port wine stains only, sessions six and subsequent - per session fee	Dermatology – Skin & Subcutaneous Tissues	
170555	Multiple stage surgical excision of benign lesion for congenital naevi (includes sebaceous cysts) (I.P.)	Dermatology – Skin & Subcutaneous Tissues	
254105	Genital biopsy (male or female) (I.P.)	Dermatology – Skin & Subcutaneous Tissues	
825000	Biopsies of the skin, subcutaneous tissue and/ or mucous membranes, any method multiple lesions (I.P.)	Dermatology – Skin & Subcutaneous Tissues	
671	Subcutaneous testosterone implantation for hypogonadotropic hypogonadism	Urology	

Code	Description	Disciplines	Higher/Minor Rate Applicable
672	Drainage of intra-scrotal abscess (I.P.)	Urology	
681	Injection of corpora cavernosa with pharmacologic agent(s) (e.g. papaverine, phentolamine)	Urology	
688	Biopsy of penis (I.P.)	Urology	
695	Prepuce, dorsal incision of	Urology	
696	Release of priapism (needle drainage)	Urology	
830	Evaluation of a new patient initiating peritoneal dialysis during a hospital admission, includes insertion of temporary intraperitoneal catheter, and the initial dialysis session (once only per member, use procedure code 831 for subsequent in-patient exchanges)	Urology	
836	Bladder, instillation of anticarcinogenic agent (Mitomycin C)	Urology	
839	Bladder, instillation of therapeutic agent for interstitial cystitis	Urology	
843	Bladder, instillation of anticarcinogenic agent (BCG medac)	Urology	
844	Trials of micturition for urinary retention post-surgery (I.P.)	Urology	
846	Botulinum toxin injection to bladder wall (I.P.)	Urology	
881	Cystoscopy with removal of JJ stent	Urology	
882	Cystoscopy, with or without biopsy, including stress testing for female stress urinary incontinence or male post prostatectomy incontinence (I.P.)	Urology	
896	Change of cystostomy tube (I.P.)	Urology	
898	Percutaneous suprapubic cystostomy (I.P.)	Urology	
936	Percutaneous tract formation for renal stone removal by another consultant (I.P.)	Urology	
1015	Urethral dilatation (I.P.)	Urology	

Code	Description	Disciplines	Higher/Minor Rate Applicable
1029	Complex uroflowmetry (using calibrated electronic equipment); for evaluation of bladder outlet obstruction and uncomplicated urge incontinence with or without ultrasound, with post void residual ultrasound screening (including counselling and clinical direction)	Urology	
1031	Complex cystometrogram using calibrated electronic equipment and urethral pressure profile studies (minimum of 2 fills), with measurement of post-voiding residual urine by ultrasound	Urology	
1250	Arterial biopsy (temporal artery, biopsy, bilateral under local anaesthetic)	Vascular Surgery	
1416	Thrombin injection into groin for pseudoaneurysm (including ultrasound guidance)	Vascular Surgery	
1455	Sclerosing operation on varicose vein(s), unilateral (I.P.)	Vascular Surgery	
1460	Sclerosing operation on varicose veins, bilateral (I.P.)	Vascular Surgery	
1500	Venous pressure and blood volume studies	Vascular Surgery	
1502	Ligation of single varicose vein in thigh or calf (I.P.)	Vascular Surgery	
1526	Stab avulsion of varicose vein(s), unilateral(I.P.)	Vascular Surgery	
1527	Stab avulsion of varicose vein(s), bilateral (I.P.)	Vascular Surgery	

