

Ophthalmology

Schedule of Benefits for Professional Fees

ANT	ERIOR SEGMENT							
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
2523	Removal of foreign body from anterior chamber, non-magnetic	No			€ 897.50	€ 364.00	€ 461.32	€ 88.00
2524	Removal of implanted material from anterior chamber	No			€ 897.50	€ 364.00	€ 461.32	€ 88.00
2525	Paracentesis of anterior chamber of eye with or without diagnostic aspiration of aqueous (I.P.)	No	Independent Procedure, Day Care		€ 337.28	€ 136.00	€ 193.09	€ 69.00
2580	Paracentesis of anterior chamber of eye for hyphaema with or without irrigation and/ or air injection	No			€ 554.44	€ 227.00	€ 277.33	€ 48.00
2586	Reform anterior chamber secondary to trabeculectomy or post cataract surgery	No	Day Care		€ 554.44	€ 227.00	€ 286.73	€ 48.00
266835	Implantation of iStent	No		For patients with mild to moderate open angle glaucoma undergoing cataract surgery or having previously had cataract surgery who require additional intraocular pressure control and for patients who experience side effects of topical drops, poor tolerance of topical drops due to severe dry eye, allergy or other systemic disease interactions, poor adherence to drop treatment regime or difficulty inserted drops due to coexisting illness or disability	€ 905.29	€ 364.00	€ 459.50	€ 88.00

ARG	ARGON												
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate					
2644	Argon or Diode laser or Xenon Arc, for treatment of retinal or choroidal disease, glaucoma, one or more treatments (I.P.)	No	Independent Procedure, Side Room		€ 673.41	€ 273.00	€ 286.73	€ 53.00					
2806	Argon laser therapy for pan-retinal photocoagulation of diabetic retinopathy or central retinal vein occlusion (per course of therapy)	No	Side Room		€ 985.28	€ 399.00	€ 398.89	€ 53.00					

AVAS	AVASTIN											
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate				
2551	Left eye, intravitreal injection of Avastin for treatment of visual impairment due to diabetic macular oedema (DME) (I.P.)	NO	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 205.73	€ 119.00	€ 194.48	€ 99.00				

AVASTIN

CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
2552	Right eye, intravitreal injection of Avastin for treatment of visual impairment due to diabetic macular oedema (DME) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 205.73	€ 119.00	€ 194.48	€ 99.00
2553	Left eye, intravitreal injection of Avastin for the treatment of neovascular (wet) age-related macular degeneration (AMD) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 205.73	€ 119.00	€ 194.48	€ 99.00
2554	Right eye, intravitreal injection of Avastin for the treatment of neovascular (wet) age-related macular degeneration (AMD) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 205.73	€ 119.00	€ 194.48	€ 99.00
2567	Left eye, intravitreal injection of Avastin for the treatment of visual impairment due to macular oedema secondary to retinal vein occlusion (RVO) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 207.64	€ 119.00	€ 196.48	€ 99.00
2568	Right eye, intravitreal injection of Avastin for the treatment of visual impairment due to macular oedema secondary to retinal vein occlusion (RVO) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 207.64	€ 119.00	€ 196.48	€ 99.00
669551	Bilateral, intravitreal injection of Avastin for treatment of visual impairment due to diabetic macular oedema (DME) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 304.80	€ 119.00	€ 295.29	€ 99.00
669555	Bilateral, intravitreal injection of Avastin for the treatment of neovascular (wet) age-related macular degeneration (AMD) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 304.80	€ 119.00	€ 295.29	€ 99.00

AVAS	AVASTIN											
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate				
669569	Bilateral, intravitreal injection of Avastin for the treatment of visual impairment due to macular oedema secondary to retinal vein occlusion (RVO) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 304.80	€ 119.00	€ 295.29	€ 99.00				

BEC	BEOVU											
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate				
2508	Left eye, intravitreal injection of Beovu for the treatment of neovascular (wet) age-related macular degeneration (AMD) (I.P.)	No	Independent Procedure, Side Room	Benefit is payable for 1 injection per month for the first 3 months. On an ongoing basis cover is applied for up to 4 injections per eye in any 12 month period. (note: in some cases 6 injections may be required), thereafter pre authorisation is required If it is medically necessary for a consultant anaesthesiologist to provide any form of anaesthetic then an anaesthesiologist report must be completed by the consultant anaesthesiologist and submitted with the claim form Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 204.21	€ 119.00	€ 193.06	€ 99.00				

BIOF	BIOPSY											
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate				
2527	Conjunctival biopsy	No	Side Room		€ 163.90	€ 69.00	€ 186.70	€ 53.00				
2547	Corneal biopsy	No			€ 220.43	€ 91.00	€ 186.70	€ 48.00				
2726	Iris biopsy (I.P.)	No	Independent Procedure		€ 554.44	€ 227.00	€ 293.67	€ 69.00				
2874	Muscle biopsy (I.P.)	No	Independent Procedure		€ 243.72	€ 100.00	€ 190.78	€ 48.00				
2895	Orbit, exploration of, including biopsy	No	Day Care		€ 673.41	€ 273.00	€ 337.61	€ 69.00				

CAT	ARACT							
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
2785	Discission of secondary membranous cataract (opacified posterior lens capsule and/ or anterior hyaloid); stab incision technique (I.P.)	No	Independent Procedure		€ 337.28	€ 136.00	€ 217.37	€ 88.00
2802	Cataract extraction plus insertion of artificial lens (includes phacoemulsification, etc.) - Monitored anaesthesia care/ nerve block/ local/ regional anaesthesia	Yes	Day Care	Pre-authorisation required for patients under 60 years of age Prosthesis benefit is payable up to the value of monofocal lens only Benefit is not payable for elective refractive lens replacement surgery Should the Irish Life Health member elect to have a premium lens inserted at time of surgery, an additional charge for the cost of the lens above an agreed Irish Life Health contribution of €135 (which is included in the hospital charge) may be made by the hospital to the member In no circumstances may an additional professional fee be charged for such premium lens by a consultant who elects to be fully participating with Irish Life Health Benefit is not payable for lens extraction for prevention or treatment of glaucoma Benefit will be paid for one overnight stay in hospital when the surgery and procedure ground rules are met and in addition for patients with ASA I or III in the following exceptional circumstances (a) Patients with only one eye (b) Co-existing eye disease e.g. glaucoma, uveitis (c) Previous retinal surgery (d) Eye injury causing corneal scarring (e) Lens subluxation	€ 876.14	€ 400.00	€ 366.48	€ 117.00
2803	Cataract extraction plus insertion of artificial lens (includes phacoemulsification, etc.) - General anaesthesia	Yes	Day Care	Pre-authorisation required for patients under 60 years of age Prosthesis benefit is payable up to the value of monofocal lens only Benefit is not payable for elective refractive lens replacement surgery Should the Irish Life Health member elect to have a premium lens inserted at time of surgery, an additional charge for the cost of the lens above an agreed Irish Life Health contribution of €135 (which is included in the hospital charge) may be made by the hospital to the member In no circumstances may an additional professional fee be charged for such premium lens by a consultant who elects to be fully participating with Irish Life Health Benefit is not payable for lens extraction for prevention or treatment of glaucoma Benefit will be paid for one overnight stay in hospital when the surgery and procedure ground rules are met and in addition for patients with ASA I or III in the following exceptional circumstances (a) Patients with only one eye (b) Co-existing eye disease e.g. glaucoma, uveitis (c) Previous retinal surgery (d) Eye injury causing corneal scarring (e) Lens subluxation	€ 876.15	€ 400.00	€ 366.48	€ 117.00

CATA	CATARACT												
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate					
668261	Left and right eye, same day cataract extraction plus insertion of artificial lens (includes phacoemulsification, etc.) - monitored anaesthesia care	Yes	Day Care	Pre-authorisation required for patients under 60 years of age Prosthesis benefit is payable up to the value of monofocal lens only Benefit is not payable for elective refractive lens replacement surgery Should the Irish Life Health member elect to have a premium lens inserted at time of surgery, an additional charge for the cost of the lens above an agreed Irish Life Health contribution of €135 (which is included in the hospital charge) may be made by the hospital to the member In no circumstances may an additional professional fee be charged for such premium lens by a consultant who elects to be fully participating with Irish Life Health Benefit is not payable for lens extraction for prevention or treatment of glaucoma Benefit will be paid for one overnight stay in hospital when the surgery and procedure ground rules are met and in addition for patients with ASA I or III in the following exceptional circumstances (a) Patients with only one eye (b) Co-existing eye disease e.g. glaucoma, uveitis (c) Previous retinal surgery	€ 1,686.83	€ 600.00	€ 604.79	€ 180.00					

If a second procedure is performed within 60 days of the initial procedure, benefit at the rate of 50% only will be paid

Should the Irish Life Health member elect to have a premium lens inserted at time of surgery, an additional charge for the cost of the lens above an agreed Irish Life Health contribution of €135 (which is included in the hospital charge) may be

In no circumstances may an additional professional fee be charged for such premium lens by a consultant who elects to be

Benefit will be paid for one overnight stay in hospital when the surgery and procedure ground rules are met and in addition

If a second procedure is performed within 60 days of the initial procedure, benefit at the rate of 50% only will be paid

€ 1,686.83

€ 600.00

€ 604.79

€ 180.00

(d) Eye injury causing corneal scarring

made by the hospital to the member

fully participating with Irish Life Health

(b) Co-existing eye disease e.g. glaucoma, uveitis

(a) Patients with only one eye

(c) Previous retinal surgery(d) Eye injury causing corneal scarring

(e) Lens subluxation

Pre-authorisation required for patients under 60 years of age Prosthesis benefit is payable up to the value of monofocal lens only Benefit is not payable for elective refractive lens replacement surgery

Benefit is not payable for lens extraction for prevention or treatment of glaucoma

for patients with ASA I or III in the following exceptional circumstances

(e) Lens subluxation

Day Care

Left and right eye, same day cataract

extraction plus insertion of artificial

lens (includes phacoemulsification, etc.) - general anaesthesia

668262

CATA	CATARACT											
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate				
668280	Insertion of artificial lens and extraction of Cataract and the insertion of a trans-trabecular micro-stent for aqueous drainage	Yes	Day Care	Pre-authorisation required for patients under 60 years of age Prosthesis benefit is payable up to the value of monofocal lens only Benefit is not payable for elective refractive lens replacement surgery Should the Irish Life Health member elect to have a premium lens inserted at time of surgery, an additional charge for the cost of the lens above an agreed Irish Life Health contribution of €135 (which is included in the hospital charge) may be made by the hospital to the member In no circumstances may an additional professional fee be charged for such premium lens by a consultant who elects to be fully participating with Irish Life Health Benefit is not payable for lens extraction for prevention or treatment of glaucoma Benefit will be paid for one overnight stay in hospital when the surgery and procedure ground rules are met and in addition for patients with ASA I or III in the following exceptional circumstances (a) Patients with only one eye (b) Co-existing eye disease e.g. glaucoma, uveitis (c) Previous retinal surgery (d) Eye injury causing corneal scarring (e) Lens subluxation If a second procedure is performed within 60 days of the initial procedure, on the same eye, benefit at the rate of 50% only will be paid	€ 930.04	€ 600.00	€ 366.48	€ 220.00				

COI	COMBINATION											
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate				
669575	Bilateral, intravitreal injection of left and right eyes with different pharmaceutical drugs for AMD/diabetic macular oedema secondary to CRVO (I.P.)	No	Independent Procedure, Day Care	To avoid payment delay, notificatipn of the drugs used and the reason why, should be submitted on the claim form. Applicable for combination of Eylea, Lucentis, Ozurdex and/or Avastin. If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is usedlf a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies.	€ €291.26	€ €119.00	€ €282.17	€ €99.00				

CON	CONJUNCTIVA											
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate				
2490	Conjunctival flap	No			€ 222.34	€ 91.00	€ 188.32	€ 48.00				
2493	Conjunctivectomy	No			€ 167.48	€ 69.00	€ 190.78	€ 53.00				
2495	Conjunctival graft	No			€ 337.28	€ 136.00	€ 190.78	€ 48.00				
2521	Symblepharon division	No			€ 220.43	€ 91.00	€ 186.70	€ 69.00				
2522	Removal of foreign body from anterior chamber, magnetic	No	Day Care		€ 897.50	€ 364.00	€ 461.32	€ 88.00				
2526	Symblephora, division of (includes conjunctival graft)	No			€ 448.17	€ 183.00	€ 225.46	€ 88.00				

COR	NEA AND SCLERA							
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
2530	Corneal grafting of un-cut graft, penetrating/lamellar	No			€ 1,330.02	€ 546.00	€ 529.73	€ 136.00
2531	Removal of sutures (late stage) post corneal grafting; corneal/sclera	No	Side Room, Local Anaesthetic		€ 163.81	€ 69.00	€ 103.93	€ 48.00
2535	Corneal surface removed and EDTA application	No	Side Room, Monitored Anaesthesia Care		€ 220.43	€ 91.00	€ 104.09	€ 48.00
2540	Corneal tattooing	No			€ 220.43	€ 91.00	€ 186.70	€ 48.00
2546	Corneal scraping	No	Day Care		€ 220.43	€ 91.00	€ 186.70	€ 48.00
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	No	Side Room		€ 220.43	€ 91.00	€ 186.70	€ 48.00
2549	Corneal grafting of pre-cut graft, penetrating/lamellar (not INTACS)	No			€ 1,345.67	€ 747.00	€ 615.86	€ 324.00
2556	Perforating injury cornea and/ or sclera not involving uveal tissue	No			€ 560.22	€ 227.00	€ 286.73	€ 69.00
2565	Perforating injury cornea and/ or sclera with reposition or resection of uveal tissue	No			€ 958.72	€ 389.00	€ 431.27	€ 88.00
2566	Repair of scleral staphyloma with or without graft	No			€ 1,345.67	€ 546.00	€ 640.23	€ 88.00
2575	Foreign body, removal of, from cornea	No	Side Room		€ 163.90	€ 69.00	€ 186.70	€ 48.00

COR	CORNEA AND SCLERA												
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate					
2577	Keratotomy, corneal relaxing incision or wedge resection for correction of surgically induced astigmatism that resulted from previous surgery (not for the correction of refractive errors to correct short sightedness, long sightedness or astigmatism) (I.P.)	No	Independent Procedure, Day Care		€ 554.44	€ 455.00	€ 337.61	€ 88.00					
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	No	Side Room		€ 735.78	€ 273.00	€ 362.90	€ 69.00					
2773	Lacrimal canaliculi and sac, probing with or without syringing, one or both eyes (I.P.)	No	Independent Procedure		€ 155.94	€ 70.00							
2775	Lacrimal sac, syringing (I.P.)	No	Independent Procedure, Side Room		€ 163.90	€ 70.00							
2800	Intacs for members suffering from keratoconous (I.P.)	Yes	Independent Procedure, Side Room	Only for members suffering from keratoconous and has a clear central cornea	€ 840.90	€ 335.00							

CRO	CROSS LINKING CROSS LINKING											
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate				
2801	Corneal cross linking (I.P.)	Yes	Independent Procedure, Side Room		€ 1,059.21	€ 425.00						

CRY	CRYOTHERAPY										
CODE	DESCRIPTION	APPROVAL	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate			
2496	Cryotherapy, unilateral	No	Day Care		€ 448.17	€ 183.00	€ 200.02	€ 53.00			
2497	Cryotherapy, bilateral	No	Day Care		€ 673.41	€ 273.00	€ 299.45	€ 53.00			

CYSTS/ TUMOURS											
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate			
2498	Conjunctival tumour with or without graft	No	Day Care		€ 448.17	€ 183.00	€ 200.02	€ 48.00			
2500	Conjunctival cyst/ granuloma, one or more excision of	No	Side Room		€ 165.33	€ 69.00	€ 188.32	€ 48.00			
2555	Corneal or scleral tumour, excision	No			€ 554.44	€ 227.00	€ 286.73	€ 88.00			
2621	Excision of chalazion, papilloma, dermoid or other cyst or lesion, single, involving skin, lid margin, tarsus, and/ or palpebral conjunctiva (I.P.)	No	Independent Procedure, Side Room		€ 187.12	€ 89.00	€ 106.37	€ 90.00			
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.)	No	Independent Procedure, Side Room, Local Anaesthetic		€ 255.28	€ 127.00	€ 106.37	€ 90.00			
2725	Iris tumour, removal	No			€ 897.50	€ 364.00	€ 448.60	€ 88.00			
2755	Dacryocystorhinostomy with or without tubes (I.P.)	No	Independent Procedure, Day Care		€ 853.60	€ 364.00	€ 448.60	€ 88.00			
2760	Lacrimal abscess, (dacrocystitis) incision	No	Side Room		€ 165.95	€ 69.00	€ 188.84	€ 48.00			
2770	Lacrimal sac excision (dacryocystectomy)	No			€ 710.38	€ 364.00	€ 424.33	€ 69.00			
2771	Lacrimal gland tumour excision	No			€ 985.28	€ 399.00	€ 437.05	€ 88.00			
2772	Conjunctivo - dacryocystorhinostomy with Lester Jones tube	No	Day Care		€ 797.01	€ 378.00	€ 480.99	€ 88.00			
2845	Local resection of ciliary body or choroidal tumour	No			€ 1,371.09	€ 273.00	€ 711.06	€ 53.00			
2905	Orbit, removal of tumour from (Kronlein's operation)	No			€ 1,002.61	€ 409.00	€ 474.04	€ 88.00			
608418	Dacryocystorhinostomy	No			€ 803.92	€ 484.00	€ 418.67	€ 263.00			

ECTI	ECTROPIAN/ENTROPIAN											
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate				
2595	Repair of ectropion; excision of tarsal wedge/ extensive (e.g. tarsal strip operations)	No	Day Care		€ 455.10	€ 183.00	€ 268.24	€ 53.00				
2600	Repair of entropion; excision tarsal wedge/ extensive (e.g. tarsal strip or capsulopalpebral fascia repairs operation)	No	Day Care		€ 460.88	€ 160.00	€ 275.18	€ 48.00				

EYEL	.IDS							
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
2591	Botulinum injection for blepharospasm or to induce ptosis (I.P.)	No	Independent Procedure, Side Room		€ 280.69	€ 113.00		
2592	Repair of ectropion; suture or thermo cauterization	No	Side Room		€ 290.69	€ 143.00	€ 188.84	€ 89.00
2596	Blepharophimosis, for pathology (not cosmetic)	No	Day Care		€ 585.63	€ 239.00	€ 299.45	€ 88.00
2601	Repair of entropion; suture or thermo cauterization	No	Side Room		€ 262.25	€ 132.00	€ 186.70	€ 82.00
2605	Epilation, trichiasis, correction of, by other than forceps (e.g. electrosurgery, cryotherapy, laser surgery), unilateral or bilateral. (I.P.)	No	Independent Procedure, Side Room		€ 175.58	€ 51.00		
2610	Injury to eyelid, repair (superficial)	No	Side Room, Local Anaesthetic		€ 163.90	€ 69.00	€ 186.70	€ 48.00
2611	Opening of tarsorrhaphy (I.P.)	No	Independent Procedure, Side Room, Local Anaesthetic		€ 167.48	€ 69.00	€ 106.37	€ 48.00
2615	Injury to eyelid, repair (deep)	No			€ 448.17	€ 183.00	€ 225.46	€ 53.00
2626	Canthotomy (I.P.)	No	Independent Procedure, Side Room		€ 98.18	€ 39.00		
2630	Tarsorrhaphy	No	Day Care		€ 337.28	€ 136.00	€ 190.78	€ 53.00
669901	Dermatochalasis causing visual field obstruction (not cosmetic)	No	Day Care		€ 590.71	€ 239.00	€ 302.05	€ 88.00

EYL	/LEA											
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate				
2559	Bilateral intravitreal injection of Eylea (Aflibercept) for the treatment of visual impairment due to diabetic macular oedema (DME) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 307.25	€ 179.00	€ 292.75	€ 170.00				

EYLEA

CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
2561	Left eye, intravitreal injection of Eylea (Aflibercept) for the treatment of neovascular (wet) age-related macular degeneration (AMD) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 203.96	€ 119.00	€ 192.81	€ 99.00
2562	Right eye, intravitreal injection of Eylea (Aflibercept) for the treatment of neovascular (wet) age-related macular degeneration (AMD) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 203.96	€ 119.00	€ 192.81	€ 99.00
2563	Bilateral intravitreal injection of Eylea (Aflibercept) for the treatment of neovascular (wet) age-related macular degeneration (AMD) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 307.25	€ 179.00	€ 292.75	€ 170.00
2564	Left eye, intravitreal injection of Eylea (Aflibercept) for the treatment of visual impairment due to diabetic macular oedema (DME) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 207.64	€ 119.00	€ 196.48	€ 99.00
2569	Right eye, intravitreal injection of Eylea (Aflibercept) for the treatment of visual impairment due to diabetic macular oedema (DME) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 207.64	€ 119.00	€ 196.48	€ 99.00
2571	Left eye, intravitreal injection of Eylea (Aflibercept) for the treatment of visual impairment due to macular oedema secondary to central retinal vein occlusion (CRVO) or branch retinal vein occlusion (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 207.64	€ 119.00	€ 196.48	€ 99.00
2572	Right eye, intravitreal injection of Eylea (Aflibercept) for the treatment of visual impairment due to macular oedema secondary to central retinal vein occlusion (CRVO) or branch retinal vein occlusion (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 207.64	€ 119.00	€ 196.48	€ 99.00
669573	Bilateral, intravitreal injection of Eylea (aflibercept) for the treatment of visual impairment due to macular oedema secondary to central retinal vein occlusion (CRVO) or branch retinal vein occlusion (I.P.)	No	Independent Procedure, Day Care	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 304.80	€ 119.00	€ 295.29	€ 99.00

GLO	GLOBE											
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate				
2635	Evisceration of eye	No			€ 667.22	€ 273.00	€ 335.70	€ 88.00				
2640	Excision of eye plus implant	No			€ 779.68	€ 319.00	€ 380.89	€ 88.00				
2645	Removal of intraocular foreign body	No			€ 897.50	€ 364.00	€ 448.60	€ 88.00				
2660	Removal of eye	No			€ 667.22	€ 273.00	€ 334.18	€ 88.00				

ILUV	ILUVIEN											
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate				
669580	Left eye, implantation of 190mcg Iluvien flucinone acetone device (I.P.)	Yes	Independent Procedure, Side Room	Treatment of vision impairments caused by Chronic diabetic macular oedema (DMO) , that is unresponsive to available therapies	€ 205.22	€ 119.00	€ 197.44	€ 99.00				
669581	Right eye, implantation of 190mcg Iluvien flucinone acetone device (I.P.)	Yes	Independent Procedure, Side Room	Treatment of vision impairments caused by Chronic diabetic macular oedema (DMO) , that is unresponsive to available therapies	€ 205.22	€ 119.00	€ 197.44	€ 99.00				

INTRAOCULAR LENS

CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
2779	Repositioning of intraocular lens prosthesis requiring an incision (I.P.)	No	Independent Procedure, Day Care	Prosthesis benefit is payable up to the value of monofocal lens only Benefit is not payable for elective refractive lens replacement surgery Should the Irish Life Health member elect to have a premium lens inserted at time of surgery, an additional charge for the cost of the lens above an agreed Irish Life Health contribution of €135 (which is included in the hospital charge) may be made by the hospital to the member In no circumstances may an additional professional fee be charged for such premium lens by a consultant who elects to be fully participating with Irish Life Health Benefit is not payable for lens extraction for prevention or treatment of glaucoma Benefit will be paid for one overnight stay in hospital when the surgery and procedure ground rules are met and in addition for patients with ASA I to III in the following exceptional circumstances (a) patients with only one eye (b) co-existing eye disease e.g. glaucoma, uveitis (c) previous retinal surgery (d) eye injury causing corneal scarring (d) lens subluxation	€ 673.41	€ 273.00	€ 299.45	€ 88.00
2780	Intraocular lens insertion not associated with concurrent cataract removal secondary implant, for exchange lens associated with previous cataract surgery only (I.P.)	Yes	Independent Procedure, Day Care	Pre-authorisation required for patients under 60 years of age Prosthesis benefit is payable up to the value of monofocal lens only Benefit is not payable for elective refractive lens replacement surgery Should the Irish Life Health member elect to have a premium lens inserted at time of surgery, an additional charge for the cost of the lens above an agreed Irish Life Health contribution of £135 (which is included in the hospital charge) may be made by the hospital to the member In no circumstances may an additional professional fee be charged for such premium lens by a consultant who elects to be fully participating with Irish Life Health Benefit is not payable for lens extraction for prevention or treatment of glaucoma Benefit will be paid for one overnight stay in hospital when the surgery and procedure ground rules are met and in addition for patients with ASA I or III in the following exceptional circumstances (a) Patients with only one eye (b) Co-existing eye disease e.g. glaucoma, uveitis (c) Previous retinal surgery (d) Eye injury causing corneal scarring (e) Lens subluxation	€ 673.41	€ 273.00	€ 299.45	€ 88.00

INTRAVITREAL INJECTIONS											
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate			
669580	Left eye, implantation of 190mcg lluvien flucinone acetone device (I.P.)	Yes	Independent Procedure, Side Room	Treatment of vision impairments caused by Chronic diabetic macular oedema (DMO) , that is unresponsive to available therapies	€ 205.22	€ 119.00	€ 197.44	€ 99.00			
669581	Right eye, implantation of 190mcg Iluvien flucinone acetone device (I.P.)	Yes	Independent Procedure, Side Room	Treatment of vision impairments caused by Chronic diabetic macular oedema (DMO) , that is unresponsive to available therapies	€ 205.22	€ 119.00	€ 197.44	€ 99.00			

IRIS	, CILIARY BODY AND CHOROID							
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
2680	Division of anterior synechiae (I.P.)	No	Independent Procedure, Day Care		€ 554.44	€ 227.00	€ 237.02	€ 69.00
2685	Cyclodialysis	No			€ 779.68	€ 319.00	€ 404.67	€ 88.00
2696	Ciliary body destruction; cyclocryotherapy or diathermy	No	Day Care		€ 404.28	€ 233.00	€ 249.74	€ 69.00
2700	Goniotomy	No			€ 897.50	€ 364.00	€ 455.55	€ 88.00
2710	Iridectomy	No			€ 554.44	€ 227.00	€ 286.73	€ 69.00
2711	Pupil reconstruction post trauma, post surgery	No			€ 897.50	€ 364.00	€ 448.60	€ 88.00
2740	Trabeculectomy/ drainage procedure	No		1 Night Only	€ 1,227.85	€ 364.00	€ 492.54	€ 69.00
2741	Laser trabeculoplasty, one or more treatments	No	Side Room		€ 716.54	€ 319.00	€ 340.54	€ 69.00
2742	Trabeculectomy and tubes, etc.	No	Day Care		€ 1,317.38	€ 538.00	€ 528.57	€ 69.00

JETI	JETREA											
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate				
2678	Left eye, intravitreal injection of Jetrea (Ocriplasmin) in adults for the treatment of vitreomacular traction (VMT), including when associated with macular hole of a diameter less than or equal to 400 microns. Claimable once only per lifetime (I.P.)	No		For procedures 2678 and 2679 benefit is only payable where the intravitreal agent listed is used for the stated indication	€ 210.35	€ 119.00	€ 199.04	€ 110.00				

JETF	JETREA STATES OF THE PROPERTY											
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate				
2679	Right eye, intravitreal injection of Jetrea (Ocriplasmin) in adults for the treatment of vitreomacular traction (VMT), including when associated with macular hole of a diameter less than or equal to 400 microns. Claimable once only per lifetime (I.P.)	No		For procedures 2678 and 2679 benefit is only payable where the intravitreal agent listed is used for the stated indication	€ 210.35	€ 119.00	€ 199.04	€ 110.00				

LAC	RIMAL APPARATUS							
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
2750	Canaliculus repair with or without tube	No	Day Care		€ 786.44	€ 319.00	€ 440.84	€ 69.00
2756	Removal of D.C.R. tube	No	Side Room		€ 98.18	€ 39.00		
2764	Probing of nasolacrimal duct, with or without irrigation; with insertion of tube or stent (I.P.)	No	Independent Procedure, Day Care		€ 264.52	€ 164.00	€ 188.32	€ 69.00
2766	Punctal closure with cautery or controller	No	Side Room		€ 165.95	€ 69.00	€ 188.84	€ 48.00
2768	3 snip operation of lacrimal punctum	No	Side Room		€ 225.24	€ 91.00	€ 190.78	€ 48.00
2769	Correction of everted punctum: cautery only	No	Side Room		€ 163.90	€ 69.00	€ 186.70	€ 48.00

LACE	LACRIMAL SAC											
CODE	DESCRIPTION	APPROVAL	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate				
2761	Lacrimal sac, syringing and probing, unilateral or bilateral (I.P.)	No	Independent Procedure, Side Room		€ 165.95	€ 90.00						

LEN:	S							
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
2781	Artisan lens implantation for aphakia (I.P.)	Yes	Independent Procedure, Day Care	Procedure must be secondary to: (a) Congenital cataract surgery where the best corrected vision using contact lens is 6/12 or there are medical contraindications to the wearing of contact lenses (details of such contraindications to be provided) (b) Lens dislocation where the best corrected vision using contact lenses is 6/12 or worse or there are medical contraindications to the wearing of contact lenses (details of such contraindications to be provided) (c) Cataract surgery where it is certified that a secondary implant is medically necessary because of a displaced lens or capsule rupture (d) Cataract surgery following previous retinal detachment treated by vitrectomy	€ 673.41	€ 362.00	€ 299.45	€ 174.00
2786	Revision or repair of operative wound of anterior segment of the eye, any type, early or late, major or minor procedure (I.P.)	No	Independent Procedure		€ 367.32	€ 150.00	€ 217.37	€ 88.00
2795	Lens extraction	No	Day Care	Benefit is not payable for elective refractive lens replacement surgery Benefit will be paid for one overnight stay in hospital when the surgery and procedure ground rules are met and in addition for patients with ASA I or III, in the following exceptional circumstances: (a) Patients with only one eye (b) Co-existing eye disease e.g. glaucoma, uveitis (c) Previous retinal surgery (d) Eye injury causing corneal scarring (e) Lens subluxation	€ 859.38	€ 477.00	€ 387.33	€ 117.00

LUC	ENTIS							
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
2509	Right eye, intravitreal injection of Beovu for the treatment of neovascular (wet) age-related macular degeneration (AMD) (I.P.)	No	Independent Procedure, Side Room	Benefit is payable for 1 injection per month for the first 3 months. On an ongoing basis cover is applied for up to 4 injections per eye in any 12 month period. (note: in some cases 6 injections may be required), thereafter pre authorisation is required If it is medically necessary for a consultant anaesthesiologist to provide any form of anaesthetic then an anaesthesiologist report must be completed by the consultant anaesthesiologist and submitted with the claim form Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 204.21	€ 119.00	€ 193.06	€ 99.00
2512	Left eye, intravitreal injection of Lucentis for the treatment of neovascular (wet) age-related macular degeneration (AMD) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 204.21	€ 119.00	€ 193.06	€ 99.00
2513	Right eye, intravitreal injection of Lucentis for the treatment of neovascular (wet) age-related macular degeneration (AMD) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 204.21	€ 119.00	€ 193.06	€ 99.00

LUCENTIS

CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
2516	Left eye, intravitreal injection of Lucentis for the treatment of visual impairment due to diabetic macular oedema (DME) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 204.21	€ 119.00	€ 193.06	€ 99.00
2517	Right eye, intravitreal injection of Lucentis for the treatment of visual impairment due to diabetic macular oedema (DME) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 204.21	€ 119.00	€ 193.06	€ 99.00
2518	Left eye, intravitreal injection of Lucentis for the treatment of visual impairment due to macular oedema secondary to retinal vein occlusion (branch RVO or central RVO) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 204.21	€ 119.00	€ 193.06	€ 99.00
2519	Right eye, intravitreal injection of Lucentis for the treatment of visual impairment due to macular oedema secondary to retinal vein occlusion (branch RVO or central RVO) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 204.21	€ 119.00	€ 193.06	€ 99.00
669514	Bilateral, intravitreal injection of Lucentis for the treatment of neovascular (wet) age-related macular degeneration (AMD) (I.P)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 304.80	€ 119.00	€ 296.74	€ 99.00
669518	Bilateral, intravitreal injection of Lucentis for the treatment of visual impairment due to diabetic macular oedema (DME) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 304.80	€ 119.00	€ 295.29	€ 99.00
669520	Bilateral, intravitreal injection of Lucentis for the treatment of visual impairment due to macular oedema secondary to retinal vein occlusion (branch RVO or central RVO) (I.P.)	No	Independent Procedure, Side Room	If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 304.80	€ 119.00	€ 295.29	€ 99.00

OCU	OCULAR MUSCLES											
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate				
2871	Transposition surgery	No			€ 1,227.85	€ 499.00	€ 624.35	€ 88.00				
2872	Post operative adjustment(s) of suture(s)	No	Side Room	Claimable once per primary procedure	€ 173.26	€ 75.00						
2873	Botulinum toxin injection to extraocular muscles	No	Side Room		€ 280.69	€ 113.00	€ 190.78	€ 48.00				

ORB	IT							
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
2890	Orbit, exenteration of	No			€ 1,345.67	€ 546.00	€ 536.48	€ 117.00
2900	Orbit, removal of foreign body from	No			€ 779.68	€ 319.00	€ 354.95	€ 88.00
2910	Orbit, repair of fracture of	No	Day Care		€ 897.50	€ 364.00	€ 480.99	€ 88.00
2911	Orbitotomy	No			€ 1,371.09	€ 559.00	€ 554.98	€ 117.00
2912	Transnasal wiring	No			€ 1,108.88	€ 449.00	€ 574.63	€ 88.00
2915	Orbit, repair of fracture of, with plastic implant	No			€ 1,121.59	€ 455.00	€ 474.04	€ 88.00

OZL	OZURDEX											
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate				
2541	Left eye, intravitreal implantation of Ozurdex (Dexamethasone) for treatment of adult patients with macular oedema following either Branch Retinal Vein Occlusion (BRVO) or Central Retinal Vein Occlusion (CRVO) (I.P.)	No	Independent Procedure, Side Room	Benefit is payable for 9 injections per eye in any 12 month period, in excess of this pre authorisation is required. If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 205.73	€ 119.00	€ 194.48	€ 99.00				
2543	Left eye, intravitreal implantation of Ozurdex (Dexamethasone) for treatment of adult patients with inflammation of the posterior segment of the eye presenting as non-infectious uveitis (I.P.)	No	Independent Procedure, Side Room	Benefit is payable for 9 injections per eye in any 12 month period, in excess of this pre authorisation is required. If it is medically necessary for a consultant Anaesthesiologist to provide any form of anaesthetic then an Anaesthesiologist report must be completed by the consultant Anaesthesiologist and submitted with the claim form. Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 205.73	€ 119.00	€ 194.48	€ 99.00				

OZURDEX

CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
669542	Right eye, intravitreal implantation of Ozurdex (Dexamethasone) for treatment of adult patients with macular oedema following either Branch Retinal Vein Occlusion (BRVO) or Central Retinal Vein Occlusion (CRVO) (I.P.)	No	Independent Procedure, Side Room	Benefit is payable for 9 injections per eye in any 12 month period, in excess of this pre authorisation is required If it is medically necessary for a consultant anaesthesiologist to provide any form of anaesthetic then an anaesthesiologist report must be completed by the consultant anaesthesiologist and submitted with the claim form Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 204.21	€ 119.00	€ 196.48	€ 99.00
669543	Bilateral, intravitreal implantation of Ozurdex (Dexamethasone) for treatment of adult patients with macular oedema following either Branch Retinal Vein Occlusion (BRVO) or Central Retinal Vein Occlusion (CRVO) (I.P.)	No	Independent Procedure, Side Room	Benefit is payable for 9 injections per eye in any 12 month period, in excess of this pre authorisation is required If it is medically necessary for a consultant anaesthesiologist to provide any form of anaesthetic then an anaesthesiologist report must be completed by the consultant anaesthesiologist and submitted with the claim form Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 304.80	€ 119.00	€ 295.29	€ 99.00
669544	Right eye, intravitreal implantation of Ozurdex (Dexamethasone) for treatment of adult patients with inflammation of the posterior segment of the eye presenting as non-infectious uveitis (I.P.)	No	Independent Procedure, Side Room	Benefit is payable for 9 injections per eye in any 12 month period, in excess of this pre authorisation is required If it is medically necessary for a consultant anaesthesiologist to provide any form of anaesthetic then an anaesthesiologist report must be completed by the consultant anaesthesiologist and submitted with the claim form Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 204.21	€ 119.00	€ 196.48	€ 99.00
669545	Bilateral, intravitreal implantation of Ozurdex (Dexamethasone) for treatment of adult patients with inflammation of the posterior segment of the eye presenting as non-infectious uveitis (I.P.)	No	Independent Procedure, Side Room	Benefit is payable for 9 injections per eye in any 12 month period, in excess of this pre authorisation is required If it is medically necessary for a consultant anaesthesiologist to provide any form of anaesthetic then an anaesthesiologist report must be completed by the consultant anaesthesiologist and submitted with the claim form Anaesthesiologist rate applies where full general anaesthetic is used If a full general anaesthetic is not administered, then code 399 for monitored anaesthesia applies	€ 304.80	€ 119.00	€ 295.29	€ 99.00

PAEI	PAEDIATRICS										
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate			
2804	Cataract extraction plus insertion of artificial lens (includes phacoemulsification, etc.) Children up to 16 years of age.	No	Day Care	Pre-authorisation required for patients under 60 years of age Prosthesis benefit is payable up to the value of monofocal lens only Benefit is not payable for elective refractive lens replacement surgery Should the Irish Life Health member elect to have a premium lens inserted at time of surgery, an additional charge for the cost of the lens above an agreed Irish Life Health contribution of €135 (which is included in the hospital charge) may be made by the hospital to the member In no circumstances may an additional professional fee be charged for such premium lens by a consultant who elects to be fully participating with Irish Life Health Benefit is not payable for lens extraction for prevention or treatment of glaucoma Benefit will be paid for one overnight stay in hospital when the surgery and procedure ground rules are met and in addition for patients with ASA I or III in the following exceptional circumstances (a) Patients with only one eye (b) Co-existing eye disease e.g. glaucoma, uveitis (c) Previous retinal surgery (d) Eye injury causing corneal scarring (e) Lens subluxation	€ 876.14	€ 400.00	€ 366.48	€ 117.00			

POS	POSTERIOR SEGMENT									
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate		
2506	Removal of silicone oil not associated with retinal repair at same operative session	No	Day Care		€ 1,371.09	€ 409.00	€ 744.48	€ 88.00		
2875	Retrobulbar, orbital floor, subconjunctival, subtenons and facial nerve injections (I.P.)	No	Independent Procedure, Side Room		€ 163.90	€ 69.00				
2880	Examination of eye under general anaesthetic (I.P.)	No	Independent Procedure, Day Care, Diagnostic		€ 225.24	€ 69.00	€ 190.78	€ 48.00		
2926	Fluorescein angiography (I.P.)	No	Independent Procedure, Side Room, Diagnostic		€ 100.20	€ 46.00				
2927	Tensilon (Edrophonium) test	No	Side Room		€ 62.92	€ 35.00				

PTE	RYGIUM REMOVAL							
CODE	DESCRIPTION	\ADDD\\\\\\I	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
2510	Pterygium removal	No	Day Care		€ 220.43	€ 91.00	€ 186.70	€ 48.00
2511	Pterygium removal and conjunctival graft	No	Day Care		€ 448.17	€ 183.00	€ 225.46	€ 53.00

RET	INAL DETACHMENT							
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
2665	Prophylaxis of retinal detachment (e.g. retinal break, lattice degeneration), one or more sessions cryotherapy, diathermy, or photocoagulation/laser	No	Side Room	Codes 2665, 2675 and 2676 cannot be combined for benefit payment purposes	€ 667.22	€ 378.00	€ 426.88	€ 69.00
2675	Repair of retinal detachment, retinopexy with scleral buckling, scleral resection or scleral implant, etc. (for diathermy, cryotherapy or photocoagulation use code 2665)	No		Codes 2665, 2675 and 2676 cannot be combined for benefit payment purposes	€ 1,676.03	€ 683.00	€ 909.17	€ 136.00
2676	Vitrectomy - including prophylaxis for retinal detachment (e.g. retinal break, lattice degeneration), one or more sessions cryotherapy, diathermy, or photocoagulation/ laser	No		Codes 2665, 2675 and 2676 cannot be combined for benefit payment purposes	€ 1,676.03	€ 683.00	€ 909.17	€ 136.00
2677	Complex repair of retinal detachment, retionopexy with scleral buckling, scleral resection or scleral implant, includes vitrectomy, claimable only when membrane dissection is also involved - including Prophylaxis of retinal detachment (e.g. retinal break, lattice degeneration), one or more sessions cryotherapy, diathermy, or photocoagulation/ laser (I.P.)	No	Independent Procedure		€ 2,573.53	€ 1,268.00	€ 1,558.56	€ 807.00

SQU	INT							
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
2870	Initial Strabismus, squint operation, horizontal, vertical or oblique	No	Day Care		€ 897.50	€ 364.00	€ 411.61	€ 88.00
657883	Subsequent strabismus/ squint operation - horizontal, vertical or oblique	No	Day Care		€ 932.09	€ 364.00	€ 415.18	€ 88.00

TECI	HNICAL FEE							
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
666599	Consultant Ophthalmologists 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			

TRE	TREATMENT									
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate		
2807	Photodynamic therapy for exudative macular degeneration (one eye) - all inclusive benefit including pre-therapy assessment and counselling, infusion of Visudyne and post-therapy assessment. Also inclusive of out-patient consultations within one week of treatment to provide pre-therapy counselling and post therapy assessment (excluding fluorescein angiography)	No	Side Room	Benefit is payable for codes 2807 and 2808 for: (1) The treatment of wet age related degeneration for individuals who have a confirmed diagnosis of: (i) Predominantly classic lesions (ii) Pure occult lesions Benefit is not payable for minimally classic or mixed lesions (2) Best corrected visual acuity 6/60 or better	€ 840.90	€ 397.00				
2808	Photodynamic therapy for exudative macular degeneration (both eyes) - all inclusive benefit including pre-therapy assessment and counselling, infusion if Visudyne and post-therapy assessment. Also inclusive of out-patient consultations within one week of treatment to provide pre-therapy counselling and post therapy assessment (excluding fluorescein angiography)	No	Side Room	Benefit is payable for codes 2807 and 2808 for: (1) The treatment of wet age related degeneration for individuals who have a confirmed diagnosis of: (i) Predominantly classic lesions (ii) Pure occult lesions Benefit is not payable for minimally classic or mixed lesions (2) Best corrected visual acuity 6/60 or better	€ 915.98	€ 433.00				

YAG								
CODE	DESCRIPTION	PRE- APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
2647	YAG laser, for pupil formation, iridectomy, membranectomy, ciliary body treatment, glaucoma, one or more treatments (I.P.)	No	Independent Procedure, Side Room		€ 667.22	€ 273.00		
2648	YAG laser capsulotomy, post cataract surgery, one or more treatments (details of previous cataract surgery must be provided on the claim form)	No	Side Room	Details of previous cataract surgery must be provided on the claim form	€ 261.05	€ 128.00		
2649	Bilateral YAG laser capsulotomy, post cataract surgery, one or more treatments (details of previous cataract surgery must be provided on the claim form)	No	Side Room	Details of previous cataract surgery must be provided on the claim form	€ 436.79	€ 128.00		