

# Pain Medicine

Schedule of Benefits  
for Professional Fees

## ARTHROCENTESIS/ INJECTIONS

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
5622	E.C.T. (each session)	No	Day Care		€ 108.52	€ 46.00	€ 261.63	€ 48.00
5624	Injection, anaesthetic agent, intercostal nerve, single (I.P.)	No	Independent Procedure, Side Room		€ 90.62	€ 45.00		

## CONSULTATION

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
636052	Removal of implanted neurostimulator	No			€ 233.02	€ 69.00	€ 174.93	€ 48.00

## CONSULTATION & TESTING

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
636999	Combined fee for insertion of spinal cord stimulator - trial and implantation stage on same day (I.P.)	Yes	Independent Procedure	<p>Benefit for the insertion of spinal cord stimulators will be subject to the following criteria being satisfied:</p> <p>(a) Whether or not low or high frequency spinal cord stimulator is used must be specified on the claim form</p> <p>(b) Prior approval is sought by a consultant recognised by Irish Life Health and who also has a Diploma in Pain Medicine</p> <p>(c) The procedure is performed in a hospital that is listed in the Irish Life Health Directory of Hospitals</p> <p>(d) Benefit will be provided for the trial stage and subsequent implantation for members who satisfy the following criteria:</p> <p>(i) An observable pathology concordant with the pain complaint</p> <p>(ii) Further corrective surgical interventions are unlikely to relieve the patient's pain</p> <p>(iii) Non interventional or other conservative therapies have failed</p> <p>(iv) Oral medications are not effective or cause intolerable side effects</p> <p>(v) No untreated chemical dependency exists</p> <p>(vi) Psychological clearance has been obtained through a consultant psychiatrist or clinical psychologist registered with the Psychological Society of Ireland</p> <p>(vii) No contra indications to surgery are present (sepsis, coagulopathy)</p> <p>(viii) Trial screening with the proposed therapy is successful</p> <p>(e) Benefit will be provided for implantation following a successful trial if the procedure is performed for one of the following clinical reasons:</p> <p>(i) Failed back surgery</p> <p>(ii) Complications, including leg pain, from unsuccessful multiple lumbar surgery to repair lower back problems</p> <p>(iii) Reflex sympathetic dystrophy</p> <p>(iv) Arachnoiditis</p> <p>(v) Radiculopathies</p> <p>(vi) Chronic refractory angina</p> <p>(vii) Painful neuropathies</p> <p>(viii) Spinal cord injury</p> <p>(f) Benefit for a day case hospital stay will be provided for the trial stage</p> <p>(g) Benefit for a three day stay for the implantation stage will be provided</p> <p>(h) Benefit will be provided for five days for members who proceed immediately following the trial to implantation during a single hospital admission</p> <p>Note: the relevant documentation to support the precertification application must be submitted to Irish Life Health in advance of treatment</p> <p>Maximum once every 7 years, stimulator or modulator or battery replacement performed within that period will not be payable</p> <p>Only for Irish Life Health approved brands of stimulators</p>	€ 1,159.28	€ 550.00	€ 600.61	€ 300.00

## EEG

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
5881	Electromyography (EMG) study, rectal mucosal sensitivity testing	No	Diagnostic, Side Room		€ 203.47	€ 91.00		
5905	Video telemetric electroencephalogram (EEG) recordings including full clinical evaluation and placement of sphenoidal electrodes	No		For procedure codes 5905 and 5906 the benefit incorporates all in-patient attendance	€ 786.44	€ 319.00	€ 402.35	€ 88.00

EEG								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
5719	Chemical sympathectomy, lumbar or coeliac plexus under image guidance (I.P.)	No	Independent Procedure, Side Room		€ 359.06	€ 136.00	€ 212.48	€ 109.00
5880	Electromyography (EMG)	No	Diagnostic, Side Room		€ 203.47	€ 91.00		

EPIDURAL								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
3540	Epidural injection (I.P.)	No	Independent Procedure		€ 286.62	€ 110.00		
3541	Caudal epidural (I.P.)	No	Independent Procedure, Side Room		€ 281.62	€ 160.00		
3543	Percutaneous lysis of epidural adhesions using solution injection (e.g. hypertonic saline, enzyme) or mechanical means (e.g. catheter) including radiological localisation (includes local anaesthesia and contrast when administered), one or more sessions (I.P.)	No	Independent Procedure, Day Care	Benefit is limited to 2 treatments per year and only for patients with low back pain in post lumbar surgery syndrome	€ 346.04	€ 170.00		

IMPLANTABLE PUMPS								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
3545	Epidural infusion with cannula	No	Day Care		€ 337.88	€ 136.00		
5038	Refilling and maintenance of implantable pump or reservoir including access to pump port (I.P.)	No	Independent Procedure, Side Room	Benefit for implantation and maintenance of pain pumps, procedure codes 5038 and 5039, applies for one of the following clinical indications: (a) Diffuse cancer pain (b) Failed back surgery (c) Osteoporosis (d) Arachnoiditis (e) Axial somatic pain (f) Painful neuropathies (g) Spinal cord injury (h) Spasticity arising from multiple sclerosis or cerebral palsy	€ 163.72	€ 69.00		
5039	Implantation of catheter system and reservoir; tunnelled, intrathecal or epidural catheter for long term medication administration via an external pump or implantable reservoir/ infusion pump (I.P.)	No	Independent Procedure		€ 748.61	€ 227.00	€ 444.01	€ 88.00

NERVES								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
5580	Destruction by radiofrequency lesioning of trigeminal ganglion via foramen ovule under x-ray guidance via foramen ovule (I.P.)	No	Independent Procedure, Day Care		€ 719.25	€ 227.00	€ 444.01	€ 227.00
5586	Destruction by neurolytic agent (chemodenervation of muscle endplate); muscles enervated by facial nerve (e.g. for blepharospasm, hemifacial spasm)	No			€ 151.03	€ 72.00		
5606	Implantation of neurostimulator electrodes, Vagus nerve	No			€ 572.47	€ 277.00	€ 292.73	€ 156.00
5621	Intravenous regional block/ sympathectomy by Bier's technique (I.P.)	No	Independent Procedure, Side Room		€ 329.71	€ 136.00		

NEURO STIMULATORS								
CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
5042	Removal of subcutaneous implantable pump (does not apply to removal of CVC) (I.P.)	No	Independent Procedure, Side Room	Does not apply to removal of CVC	€ 396.13	€ 194.00	€ 239.01	€ 122.00
5043	Removal of spinal neurostimulator pulse generator or receiver, or neurostimulator electrode percutaneous array(s) or plate/paddle(s) (I.P.)	No	Independent Procedure, Day Care		€ 446.24	€ 219.00	€ 262.81	€ 137.00

## NEURO STIMULATORS

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
5044	Revision including replacement, when performed, or re-positioning of spinal neurostimulator electrode percutaneous array(s) or plate/ paddle(s); includes fluoroscopy (I.P.)	Yes	Independent Procedure, Day Care	<p>Benefit for the insertion of spinal cord stimulators will be subject to the following criteria being satisfied:</p> <p>(a) Whether or not low or high frequency spinal cord stimulator is used must be specified on the claim form.</p> <p>(b) Prior approval is sought by a consultant recognised by Irish Life Health and who also has a Diploma in Pain Medicine.</p> <p>(c) The procedure is performed in a hospital that is listed in the Irish Life Health Directory of Hospitals.</p> <p>(d) Benefit will be provided for the trial stage and subsequent implantation for members who satisfy the following criteria:</p> <ul style="list-style-type: none"> <li>(i) An observable pathology concordant with the pain complaint</li> <li>(ii) Further corrective surgical interventions are unlikely to relieve the patient's pain</li> <li>(iii) Non interventional or other conservative therapies have failed</li> <li>(iv) Oral medications are not effective or cause intolerable side effects</li> <li>(v) No untreated chemical dependency exists</li> <li>(vi) Psychological clearance has been obtained through a consultant psychiatrist or clinical psychologist registered with the Psychological Society of Ireland</li> <li>(vii) No contra indications to surgery are present (sepsis, coagulopathy)</li> <li>(viii) Trial screening with the proposed therapy is successful</li> </ul> <p>(e) Benefit will be provided for implantation following a successful trial if the procedure is performed for one of the following clinical reasons:</p> <ul style="list-style-type: none"> <li>(i) Failed back surgery</li> <li>(ii) Complications, including leg pain, from unsuccessful multiple lumbar surgery to repair lower back problems</li> <li>(iii) Reflex sympathetic dystrophy</li> <li>(iv) Arachnoiditis</li> <li>(v) Radiculopathies</li> <li>(vi) Chronic refractory angina</li> <li>(vii) Painful neuropathies</li> <li>(viii) Spinal cord injury</li> </ul> <p>(f) Benefit for a day case hospital stay will be provided for the trial stage.</p> <p>(g) Benefit for a three day stay for the implantation stage will be provided.</p> <p>(h) Benefit will be provided for five days for members who proceed immediately following the trial to implantation during a single hospital admission. Note: the relevant documentation to support the precertification application must be submitted to Irish Life Health in advance of treatment. Maximum once every 7 years, stimulator or modulator or battery replacement performed within that period will not be payable. Only for Irish Life Health approved brands of stimulators.</p>	€ 540.61	€ 265.00	€ 319.78	€ 166.00
5906	Video telemetric electroencephalogram (EEG) recordings including full clinical evaluation following placement of sub dural electrodes	No		For procedure codes 5905 and 5906 the benefit incorporates all in-patient attendance	€ 559.25	€ 227.00		

## NEURO STIMULATORS

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
5984	Insertion of spinal cord stimulator - trial stage (I.P.)	Yes	Independent Procedure, Day Care	<p>Benefit for the insertion of spinal cord stimulators will be subject to the following criteria being satisfied:</p> <ul style="list-style-type: none"> <li>(a) Prior approval is sought by a consultant recognised by Irish Life Health and who also has a Diploma in Pain Medicine</li> <li>(b) The procedure is performed in a hospital that is listed in the Irish Life Health Directory of Hospitals</li> <li>(c) Benefit will be provided for the trial stage and subsequent implantation for members who satisfy the following criteria: <ul style="list-style-type: none"> <li>(i) An observable pathology concordant with the pain complaint</li> <li>(ii) Further corrective surgical interventions are unlikely to relieve the patient's pain</li> <li>(iii) Non interventional or other conservative therapies have failed</li> <li>(iv) Oral medications are not effective or cause intolerable side effects</li> <li>(v) No untreated chemical dependency exists</li> <li>(vi) Psychological clearance has been obtained through a consultant psychiatrist or clinical psychologist registered with the Psychological Society of Ireland</li> <li>(vii) No contra indications to surgery are present (sepsis, coagulopathy)</li> <li>(viii) Trial screening with the proposed therapy is successful</li> </ul> </li> <li>(d) Benefit will be provided for implantation following a successful trial if the procedure is performed for one of the following clinical reasons: <ul style="list-style-type: none"> <li>(i) Failed back surgery</li> <li>(ii) Complications, including leg pain, from unsuccessful multiple lumbar surgery to repair lower back problems</li> <li>(iii) Reflex sympathetic dystrophy</li> <li>(iv) Arachnoiditis</li> <li>(v) Radiculopathies</li> <li>(vi) Chronic refractory angina</li> <li>(vii) Painful neuropathies</li> <li>(viii) Spinal cord injury</li> </ul> </li> <li>(e) Benefit for a day case hospital stay will be provided for the trial stage</li> <li>(f) Benefit for a three day stay for the implantation stage will be provided</li> <li>(g) Benefit will be provided for a three day stay for members who proceed immediately following the trial to implantation during a single hospital admission</li> </ul> <p>Note: the relevant documentation to support the precertification application must be submitted to Irish Life Health in advance of treatment</p> <p>Maximum once every 7 years, stimulator or modulator or battery replacement performed within that period will not be payable</p> <p>Only for Irish Life Health approved brands of stimulators</p>	€ 529.86	€ 249.00	€ 272.06	€ 140.00

## NEURO STIMULATORS

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
5999	Insertion of spinal cord stimulator - implantation stage (I.P.)	Yes	Independent Procedure	<p>Benefit for the insertion of spinal cord stimulators will be subject to the following criteria being satisfied:</p> <ul style="list-style-type: none"> <li>(a) Prior approval is sought by a consultant recognised by Irish Life Health and who also has a Diploma in Pain Medicine</li> <li>(b) The procedure is performed in a hospital that is listed in the Irish Life Health Directory of Hospitals</li> <li>(c) Benefit will be provided for the trial stage and subsequent implantation for members who satisfy the following criteria: <ul style="list-style-type: none"> <li>(i) An observable pathology concordant with the pain complaint</li> <li>(ii) Further corrective surgical interventions are unlikely to relieve the patient's pain</li> <li>(iii) Non interventional or other conservative therapies have failed</li> <li>(iv) Oral medications are not effective or cause intolerable side effects</li> <li>(v) No untreated chemical dependency exists</li> <li>(vi) Psychological clearance has been obtained through a consultant psychiatrist or clinical psychologist registered with the Psychological Society of Ireland</li> <li>(vii) No contra indications to surgery are present (sepsis, coagulopathy)</li> <li>(viii) Trial screening with the proposed therapy is successful</li> </ul> </li> <li>(d) Benefit will be provided for implantation following a successful trial if the procedure is performed for one of the following clinical reasons: <ul style="list-style-type: none"> <li>(i) Failed back surgery</li> <li>(ii) Complications, including leg pain, from unsuccessful multiple lumbar surgery to repair lower back problems</li> <li>(iii) Reflex sympathetic dystrophy</li> <li>(iv) Arachnoiditis</li> <li>(v) Radiculopathies</li> <li>(vi) Chronic refractory angina</li> <li>(vii) Painful neuropathies</li> <li>(viii) Spinal cord injury</li> </ul> </li> <li>(e) Benefit for a day case hospital stay will be provided for the trial stage</li> <li>(f) Benefit for a three day stay for the implantation stage will be provided</li> <li>(g) Benefit will be provided for a three day stay for members who proceed immediately following the trial to implantation during a single hospital admission</li> </ul> <p>Note: the relevant documentation to support the precertification application must be submitted to Irish Life Health in advance of treatment</p> <p>Maximum once every 7 years, stimulator or modulator or battery replacement performed within that period will not be payable</p> <p>Only for Irish Life Health approved brands of stimulators</p>	€ 672.26	€ 317.00	€ 345.37	€ 178.00
636699	Consultant in Pain Management Private Rooms Technical Fee	No		<p>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</p>	€ 88.95			



## PAIN BLOCK

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
5614	Peripheral nerve lesioning including pulsed radiofrequency or electrical stimulation (I.P.)	No	Independent Procedure, Side Room		€ 233.36	€ 111.00		
5619	Subsequent procedure 5617 to the same anatomical site, one or more levels, cervical - less than 18 months after initial procedure (I.P.)	No	Independent Procedure, Day Care, Local Anaesthetic	The following information must be provided on the claim form before benefit can be considered for payment: (a) Date of initial treatment (b) Details of the level(s) that were treated by rhizotomy i.e. C3 to C5 (c) Confirm the temperature used to perform the procedure (d) Side of the Spine – left or right	€ 536.33	€ 271.00	€ 252.44	€ 60.00
5620	Sympathetic block, under image guidance (I.P.)	No	Independent Procedure, Side Room		€ 320.40	€ 136.00		
5625	Injection, anaesthetic agent, intercostal nerve, multiple, regional block (I.P.)	No	Independent Procedure, Side Room		€ 128.72	€ 63.00		

## PAIN INJECTION

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
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.)	No	Independent Procedure, Side Room		€ 313.42	€ 174.00		

## PAIN INJECTION

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
5051	Replacement of spinal neurostimulator pulse generator or receiver direct or inductive coupling (I.P.)	Yes	Independent Procedure, Day Care	<p>Benefit for the insertion of spinal cord stimulators will be subject to the following criteria being satisfied:</p> <p>(a) Prior approval is sought by a consultant recognised by Irish Life Health and who also has a Diploma in Pain Medicine</p> <p>(b) The procedure is performed in a hospital that is listed in the Irish Life Health Directory of Hospitals</p> <p>(c) Benefit will be provided for the trial stage and subsequent implantation for members who satisfy the following criteria:</p> <ul style="list-style-type: none"> <li>(i) An observable pathology concordant with the pain complaint</li> <li>(ii) Further corrective surgical interventions are unlikely to relieve the patient's pain</li> <li>(iii) Non interventional or other conservative therapies have failed</li> <li>(iv) Oral medications are not effective or cause intolerable side effects</li> <li>(v) No untreated chemical dependency exists</li> <li>(vi) Psychological clearance has been obtained through a consultant psychiatrist or clinical psychologist registered with the Psychological Society of Ireland</li> <li>(vii) No contra indications to surgery are present (sepsis, coagulopathy)</li> <li>(viii) Trial screening with the proposed therapy is successful</li> </ul> <p>(d) Benefit will be provided for implantation following a successful trial if the procedure is performed for one of the following clinical reasons:</p> <ul style="list-style-type: none"> <li>(i) Failed back surgery</li> <li>(ii) Complications, including leg pain, from unsuccessful multiple lumbar surgery to repair lower back problems</li> <li>(iii) Reflex sympathetic dystrophy</li> <li>(iv) Arachnoiditis</li> <li>(v) Radiculopathies</li> <li>(vi) Chronic refractory angina</li> <li>(vii) Painful neuropathies</li> <li>(viii) Spinal cord injury</li> </ul> <p>(e) Benefit for a day case hospital stay will be provided for the trial stage</p> <p>(f) Benefit for a three day stay for the implantation stage will be provided</p> <p>(g) Benefit will be provided for a three day stay for members who proceed immediately following the trial to implantation during a single hospital admission</p> <p>Note: the relevant documentation to support the precertification application must be submitted to Irish Life Health in advance of treatment</p> <p>Maximum once every 7 years, stimulator or modulator or battery replacement performed within that period will not be payable</p> <p>Only for Irish Life Health approved brands of stimulators</p>	€ 559.25	€ 265.00	€ 319.78	€ 166.00
5575	Injection of trigeminal ganglion via foramen ovale under image guidance (I.P.)	No	Independent Procedure, Side Room	Combined Practitioner Fee - may only be claimed by the anaesthesiologist or the surgeon but not both.	€ 329.71	€ 91.00		
5610	Sensory nerve, neurectomy	No			€ 651.51	€ 273.00	€ 330.02	€ 69.00

## PULSED RADIOFREQUENCY

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
5611	Transforaminal injection of anaesthetic agent, assessment of response and application of steroid if indicated to medial branch nerve or dorsal root ganglion at one or more levels under image guidance (I.P.)	No	Independent Procedure, Side Room, Local Anaesthetic		€ 324.08	€ 183.00	€ 261.52	€ 88.00
5612	Pulsed radiofrequency (PRF) lesioning of medial branch nerve or dorsal root ganglion, one or more levels under image guidance with sensorimotor testing (I.P.)	No	Independent Procedure, Day Care, Local Anaesthetic		€ 430.36	€ 214.00	€ 250.59	€ 60.00

## RHIZOTOMY

CODE	DESCRIPTION	PRE-APPROVAL REQUIRED	PAYMENT INDICATORS	PAYMENT RULES	Participating Consultant Rate	Standard Consultant Rate	Participating Anaesthetist Rate	Standard Anaesthetist Rate
5615	Peripheral nerve block for pain control using nerve stimulator or ultrasound guidance (I.P.)	No	Independent Procedure, Side Room		€ 212.27	€ 91.00		
5616	Per site - first neurodestructive thermal rhizotomy (temperature > 69°C) under image guidance, with sensory and motor testing, three levels, lumbar, sacral or thoracic (I.P.)	No	Independent Procedure, Day Care, Local Anaesthetic	The following information must be provided on the claim form before benefit can be considered for payment: (a) Details of the level(s) that were treated by rhizotomy i.e. L3 to L5 And/or S1 to S3 (b) Confirm the temperature used to perform the procedure (c) Side of the spine – left or right	€ 756.10	€ 376.00	€ 252.44	€ 60.00
5617	Per site - first neurodestructive thermal rhizotomy (temperature > 69°C) under image guidance, with sensory and motor testing, three levels, cervical (I.P.)	No	Independent Procedure, Day Care, Local Anaesthetic	The following information must be provided on the claim form before benefit can be considered for payment: (a) Details of the level(s) that were treated by rhizotomy i.e. C3 to C5 (b) Confirm the temperature used to perform the procedure (c) Side of the Spine – left or right	€ 953.74	€ 474.00	€ 252.44	€ 60.00
5618	Subsequent procedure 5616 to the same anatomical site, one or more levels, lumbar, sacral or thoracic - less than 18 months after initial procedure (I.P.)	No	Independent Procedure, Day Care	The following information must be provided on the claim form before benefit can be considered for payment: (a) Date of initial treatment (b) Details of the level(s) that were treated by rhizotomy i.e. L3 to L5 And/or S1 to S3 (c) Confirm the temperature used to perform the procedure (d) Side of the spine – left or right	€ 426.82	€ 215.00	€ 252.44	€ 60.00