



**Irish Life**  
health

**Schedule  
of Benefits**  
for Professional  
Fees 2020

**Thoracic  
Procedures**

## ATRIA

| CODE | DESCRIPTION                            | PRE-APPROVAL REQUIRED | PAYMENT INDICATORS    | PAYMENT RULES                      |
|------|--|-----------------------|-----------------------|------------------------------------|
| 5208 | Left atrial appendage occlusion (I.P.) | Yes                   | Independent Procedure | Cover must be requested in advance |
| 5824 | Refashioning of atrium (Ebstein's)     | No                    |                       |                                    |
| 5826 | Operations on wall of atrium           | No                    |                       |                                    |

## ATRIAL FIBRILLATION

| CODE | DESCRIPTION   | PRE-APPROVAL REQUIRED | PAYMENT INDICATORS | PAYMENT RULES   |
|------|---|-----------------------|--------------------|---|
| 5033 | Thoracoscopic epicardial radiofrequency ablation; operative tissue ablation with or without reconstruction of atria (e.g. modified maze procedure) without cardiopulmonary bypass (I.P.)                                      | No                    |                    | Conditions of payment for code 5033 are as follows:<br>(a) Benefit will be provided for thoracoscopic epicardial radiofrequency ablation for patients with atrial fibrillation who have failed to respond to trans-catheter endocardial ablation provided the decision is the consensus of a multidisciplinary team that includes both a cardiologist and a cardiothoracic surgeon, both with training and experience in the use of intra-operative electrophysiology<br>(b) Relevant documentation confirming the above must be provided when the claim is being submitted |
| 5134 | Operative ablation/incision and/or reconstruction of atria for treatment of atrial fibrillation or flutter (e.g. maze procedure)  | No                    |                    |   |
| 5138 | Operative ablation of atrial fibrillation, supraventricular arrhythmogenic focus or pathway (e.g. Wolff-Parkinson-White, atrioventricular node re-entry), tract(s) and/or focus (foci) with or without cardiopulmonary bypass | No                    |                    |   |
| 5139 | Operative ablation of atrial fibrillation, ventricular arrhythmogenic focus with cardiopulmonary bypass   | No                    |                    |   |

## BIOPSY

| CODE | DESCRIPTION  | PRE-APPROVAL REQUIRED | PAYMENT INDICATORS                | PAYMENT RULES |
|------|--|-----------------------|-----------------------------------|---------------|
| 5041 | Myocardial biopsy                                    | No                    | Diagnostic                        |               |
| 5124 | Mediastinoscopy, without biopsy (I.P.)               | No                    | Independent Procedure, Diagnostic |               |
| 5135 | Mediastinoscopy and biopsy                           | No                    | Diagnostic                        |               |
| 5136 | Percutaneous transthoracic biopsy                    | No                    | Diagnostic                        |               |
| 5137 | Percutaneous transthoracic biopsy under CAT guidance | No                    | Diagnostic                        |               |
| 5217 | Needle biopsy, transthoracic                         | No                    | Diagnostic                        |               |
| 5218 | Needle biopsy, abdominal                             | No                    | Diagnostic                        |               |

## BRONCHI / LUNGS / PLEURA

| CODE   | DESCRIPTION   | PRE-APPROVAL REQUIRED | PAYMENT INDICATORS                | PAYMENT RULES |
|--------|---|-----------------------|-----------------------------------|---------------|
| 5230   | Empyema, drainage of (I.P.)   | No                    |                                   |               |
| 5231   | Percutaneous drainage of empyema  | No                    |                                   |               |
| 5235   | Paracentesis thoracis with intercostal drain (I.P.)   | No                    | Independent Procedure, Diagnostic |               |
| 5250   | Pleurodesis (I.P.)  | No                    |                                   |               |
| 5251   | Closed drainage of pneumothorax   | No                    |                                   |               |
| 5260   | Thoracoscopy (I.P.)   | No                    | Independent Procedure, Diagnostic |               |
| 5265   | Thoracoscopy with intrapleural procedure (I.P.)   | No                    | Independent Procedure             |               |
| 5928   | Therapeutic operations on bronchus or lung using rigid bronchoscopy   | No                    | Diagnostic                        |               |
| 5941   | Total pneumonectomy   | No                    |                                   |               |
| 5942   | Lobectomy of lung (including excision of segment)   | No                    |                                   |               |
| 5943   | Thoracoscopic lung resections, includes robotic approach (I.P.)   | No                    |                                   |               |
| 5944   | Open excision of lesion of lung   | No                    |                                   |               |
| 5946   | Decortication of pleura or lung, open or thoracoscopic  | No                    |                                   |               |
| 5947   | Removal of lung, with resection of segment of trachea followed by broncho-tracheal anastomosis (sleeve pneumonectomy)                               | No                    |                                   |               |
| 5948   | Removal of lung, with circumferential resection of segment of bronchus followed by broncho-bronchial anastomosis (sleeve lobectomy)                 | No                    |                                   |               |
| 5949   | Pleurectomy for pneumothorax, open  | No                    |                                   |               |
| 5951   | Endoscopic examination of pleura (I.P.)   | No                    | Independent Procedure             |               |
| 5952   | Insertion of tube drain into pleural cavity   | No                    |                                   |               |
| 5953   | Introduction of substance into pleural cavity with chest aspiration   | No                    |                                   |               |
| 5982   | Total pneumonectomy with lymphadenectomy  | No                    |                                   |               |
| 5983   | Lobectomy of lung (including excision of segment) with lymphadenectomy  | No                    |                                   |               |
| 325982 | Video-assisted thoracoscopic surgery (VATS) - minimally invasive surgery for total pneumonectomy with lymphadenectomy                               | No                    |                                   |               |
| 325983 | Video-assisted thoracoscopic surgery (VATS) - minimally invasive surgery for lobectomy of lung (including excision of segment) with lymphadenectomy | No                    |                                   |               |
| 328582 | Robotically assisted thoracoscopic pneumonectomy, lobectomy (single or bilobar), segmentectomy or LVRS (other than bullectomy)                      | No                    |                                   |               |
| 328583 | Thoracoscopic pneumonectomy, lobectomy (single or bilobar), segmentectomy or LVRS (other than bullectomy)   | No                    |                                   |               |

## BRONCHI / LUNGS / PLEURA

| CODE   | DESCRIPTION  | PRE-APPROVAL REQUIRED | PAYMENT INDICATORS | PAYMENT RULES |
|--------|--|-----------------------|--------------------|---------------|
| 328592 | Robotically assisted thoracoscopic pneumonectomy, lobectomy (single or bilobar), segmentectomy with regional lymphadenectomy | No                    |                    |               |
| 328593 | Thoracoscopic pneumonectomy, lobectomy (single or bilobar), segmentectomy with regional lymphadenectomy                      | No                    |                    |               |

## BRONCHOSCOPY

| CODE   | DESCRIPTION  | PRE-APPROVAL REQUIRED | PAYMENT INDICATORS                           | PAYMENT RULES   |
|--------|--|-----------------------|--|---|
| 1994   | Bronchoscopy; diagnostic, flexible with or without one of the following: (a) bronchoalveolar lavage, (b) cell washing or brushing, (c) bronchial biopsy (I.P.)   | No                    | Independent Procedure, Diagnostic, Day Care  | Where a code 2004 or a Code 2113 is performed on the same day and in a different physical location in the hospital with gap of 2 hours or more, then the payment indicator Independent Procedure will not apply for Consultant fees only.   |
| 1999   | Bronchoscopy with laser ablation/ resection of tumour (I.P.)   | No                    | Independent Procedure                        |   |
| 2004   | Bronchoscopy with transbronchial biopsy of tumour(s), nodule(s) or lymph node(s) with or without fluoroscopic or endobronchial ultrasound (EBUS) guidance (includes washing or brushings, if performed) (I.P.)                                 | No                    | Independent Procedure, Diagnostic, Day Care  | Where a Code 1994 is performed on the same day and in a different physical location in the hospital with gap of 2 hours or more, then the payment indicator Independent Procedure will not apply for Consultant fees only.                  |
| 2012   | Bronchoscopy with or without bronchial biopsy (claimable for patients less than 2 years old) (I.P.)  | No                    | Independent Procedure, Diagnostic            | Benefit is claimable for patients less than 2 years old only  |
| 2013   | Bronchoscopy; rigid, under general anaesthetic (I.P.)  | No                    | Independent Procedure, Diagnostic, Day Care  |   |
| 2014   | Bronchoscopy and airway evaluation in patients with suspected (on the basis of severe sleep disturbance) or proven sleep apnoea (I.P.)   | No                    | Independent Procedure, Diagnostic, Day Care  |   |
| 2020   | Bronchoscopy with removal of foreign body (includes foreign body removal by rigid endoscopy) (I.P.)  | No                    | Independent Procedure, Diagnostic            |   |
| 231652 | Bronchoscopy, rigid or flexible including fluoroscopic guidance with EBUS (endobronchial ultrasound) guided transtracheal and/or transbronchial sampling from one or two mediastinal and/ or hilar lymph node stations or structures (I.P.)    | No                    | Independent Procedure, Side Room             |   |
| 231653 | Bronchoscopy, rigid or flexible including fluoroscopic guidance with EBUS (endobronchial ultrasound) guided transtracheal and/or transbronchial sampling from three or more mediastinal and/ or hilar lymph node stations or structures (I.P.) | No                    | Independent Procedure, Side Room             |   |
| 941921 | Combined bronchoscopy with laser ablation/ resection of tumour and full pulmonary function studies for the diagnosis and assessment of obstructive or restrictive lung disease (I.P.)  | No                    | Independent Procedure, Diagnostic, Side Room | To be eligible for this benefit, the rules from codes 1999 & 2113 apply plus the procedures must be performed:<br>(a) On the same day and<br>(b) In the same approved Irish Life Health approved hospital and<br>(c) By the same consultant |

## BYPASS SURGERY

| CODE | DESCRIPTION  | PRE-APPROVAL REQUIRED | PAYMENT INDICATORS | PAYMENT RULES                     |
|------|--|-----------------------|--------------------|-----------------------------------|
| 5131 | Open procurement of a radial artery to secure conduit for construction of a coronary artery bypass graft (payable in full with main benefit) | No                    |                    | Payable in full with main benefit |
| 5158 | Coronary artery bypass grafts using venous graft(s) and/or arterial graft(s)   | No                    |                    |                                   |
| 5168 | Revision coronary artery bypass grafts using venous graft(s) and/ or arterial grafts   | No                    |                    |                                   |
| 5867 | Removal of pacing system with bypass   | No                    |                    |                                   |
| 5894 | Extra anatomic bypass of aorta   | No                    |                    |                                   |

## CHEST WALL

| CODE | DESCRIPTION   | PRE-APPROVAL REQUIRED | PAYMENT INDICATORS                | PAYMENT RULES   |
|------|---|-----------------------|-----------------------------------|---|
| 5015 | Lung abscess with thoracotomy, drainage of                                    | No                    |                                   |   |
| 5205 | Vagotomy (through chest)  | No                    |                                   |   |
| 5270 | Thoracotomy including lung or pleural biopsy (I.P.)                           | No                    | Independent Procedure, Diagnostic |   |
| 5274 | Exploration for post-operative haemorrhage or thrombosis, chest               | No                    |                                   |   |
| 5907 | Repair of congenital diaphragmatic hernia using thoracic approach in neonates | No                    |                                   | The anaesthetist benefit is all inclusive of pre-operative and post-operative intensive care<br>No other anaesthetic or intensive care benefits are payable |
| 5908 | Thoracoplasty, one stage  | No                    |                                   |   |
| 5909 | Excision of chest wall tumour including ribs                                  | No                    |                                   |   |
| 5912 | Correction of pectus deformity of chest wall                                  | No                    |                                   |   |
| 5913 | Reconstruction of chest wall  | No                    |                                   |   |
| 5914 | Exploratory thoracotomy   | No                    |                                   |   |
| 5916 | Resection of rib and open drainage of pleural cavity                          | No                    |                                   |   |
| 5917 | Repair of rupture of diaphragm  | No                    |                                   | Procedure code 5917 is not payable in conjunction with procedure code 271   |
| 5918 | Plication of paralysed diaphragm  | No                    |                                   |   |
| 5927 | Cervical rib resection for thoracic outlet syndrome                           | No                    |                                   |   |
| 5963 | Repair of diaphragmatic hernia using thoracic approach                        | No                    |                                   |   |

## FIBREOPTIC PROCEDURES

| CODE | DESCRIPTION   | PRE-APPROVAL REQUIRED | PAYMENT INDICATORS | PAYMENT RULES |
|------|---|-----------------------|--------------------|---------------|
| 5931 | Destruction of lesion of trachea                              | No                    |                    |               |
| 5932 | Dilatation of tracheal stricture                              | No                    |                    |               |
| 5936 | Dilatation of bronchial stricture by fibre optic bronchoscopy | No                    | Diagnostic         |               |

## MEDIASTINUM

| CODE | DESCRIPTION  | PRE-APPROVAL REQUIRED | PAYMENT INDICATORS    | PAYMENT RULES |
|------|--|-----------------------|-----------------------|---------------|
| 5110 | Thoracoscopy, surgical; with oesophagomyotomy (Heller type)  | No                    |                       |               |
| 5113 | Pericardial drainage   | No                    |                       |               |
| 5114 | Continuous pericardial drainage  | No                    |                       |               |
| 5120 | Excision of mediastinal tumour, includes robotic approach  | No                    |                       |               |
| 5121 | Mediastinotomy with exploration, drainage, removal of foreign body, or biopsy; cervical approach   | No                    |                       |               |
| 5122 | Mediastinotomy with exploration, drainage, removal of foreign body, or biopsy; transthoracic approach, including either transthoracic or median sternotomy | No                    |                       |               |
| 5123 | Excision of mediastinal cyst   | No                    |                       |               |
| 5148 | Laparoscopy, surgical, oesophagomyotomy (Heller type) with fundoplasty, when performed   | No                    |                       |               |
| 5161 | Tracheo-oesophageal fistula, repair of   | No                    |                       |               |
| 5162 | Repair, tracheo-oesophageal atresia  | No                    |                       |               |
| 5163 | Repair, tracheo-oesophageal fistula (TOF) alone (H-fistula)  | No                    |                       |               |
| 5164 | Repair, tracheo-oesophageal fistula (TOF) and atresia, replacement   | No                    |                       |               |
| 5165 | Oesophagectomy (all forms including three stages) (I.P.)   | No                    | Independent Procedure |               |
| 5171 | Transection of oesophagus with repair, for oesophageal varices   | No                    |                       |               |
| 5172 | Oesophageal devascularisation  | No                    |                       |               |
| 5801 | Exploration of mediastinum   | No                    |                       |               |
| 5802 | Endoscopic extirpation of lesion of mediastinum  | No                    | Diagnostic            |               |
| 5863 | Thymectomy, includes robotic approach  | No                    |                       |               |
| 5872 | Excision of pericardium (I.P.)   | No                    | Independent Procedure |               |
| 5874 | Pericardiocentesis   | No                    |                       |               |
| 5876 | Transthoracic drainage of pericardium  | No                    |                       |               |

## MEDIASTINUM

| CODE | DESCRIPTION  | PRE-APPROVAL REQUIRED | PAYMENT INDICATORS    | PAYMENT RULES |
|------|--|-----------------------|-----------------------|---------------|
| 5877 | Creation of pericardial window or partial resection for drainage (I.P.)    | No                    |                       |               |
| 5878 | Closure of median sternotomy separation with or without debridement (I.P.) | No                    | Independent Procedure |               |

## PACEMAKER

| CODE | DESCRIPTION  | PRE-APPROVAL REQUIRED | PAYMENT INDICATORS | PAYMENT RULES |
|------|--|-----------------------|--------------------|---------------|
| 5141 | Removal of permanent epicardial pacemaker and electrodes by thoracotomy; single lead system, atrial or ventricular | No                    |                    |               |
| 5142 | Removal of single or dual chamber pacing cardioverter defibrillator electrode(s); by thoracotomy                   | No                    |                    |               |
| 5223 | Insertion of permanent pacemaker with epicardial electrode(s), by thoracotomy                                      | No                    |                    |               |

## SEPTUM PROCEDURES

| CODE | DESCRIPTION  | PRE-APPROVAL REQUIRED | PAYMENT INDICATORS | PAYMENT RULES |
|------|--|-----------------------|--------------------|---------------|
| 5190 | Rashkind septostomy  | No                    |                    |               |
| 5814 | Closure of defect of atrioventricular septum using dual prosthetic patches | No                    |                    |               |
| 5816 | Closure of defect of interatrial septum                                    | No                    |                    |               |
| 5817 | Closure of defect of interventricular septum                               | No                    |                    |               |
| 5818 | Planned repair of post infarction ventricular septal defect                | No                    |                    |               |
| 5819 | Emergency repair of post infarction ventricular septal defect              | No                    |                    |               |
| 5821 | Other open operations on the septum of the heart                           | No                    |                    |               |

## TRACHEA

| CODE | DESCRIPTION                    | PRE-APPROVAL REQUIRED | PAYMENT INDICATORS | PAYMENT RULES  |
|------|--------------------------------|-----------------------|--------------------|--|
| 5919 | Partial excision of trachea    | No                    |                    |  |
| 5920 | Reconstruction of trachea      | No                    |                    |  |
| 5921 | Tracheostomy, permanent        | No                    |                    | For procedure codes 5921 and 5922, where these procedures are performed in an ICU setting, benefit is payable once only during the patient's stay in the intensive care unit |
| 5922 | Insertion of mini tracheostomy | No                    |                    | For procedure codes 5921 and 5922, where these procedures are performed in an ICU setting, benefit is payable once only during the patient's stay in the intensive care unit |

## TRACHEA

| CODE | DESCRIPTION   | PRE-APPROVAL REQUIRED | PAYMENT INDICATORS | PAYMENT RULES |
|------|---|-----------------------|--------------------|---------------|
| 5923 | Destruction of lesion of trachea by rigid endoscopy | No                    |                    |               |
| 5924 | Dilatation of tracheal stricture by rigid endoscopy | No                    |                    |               |

## VALVES

| CODE   | DESCRIPTION  | PRE-APPROVAL REQUIRED | PAYMENT INDICATORS    | PAYMENT RULES |
|--------|--|-----------------------|-----------------------|---------------|
| 5151   | Percutaneous trans septal mitral valvuloplasty (I.P.)  | No                    | Independent Procedure |               |
| 5152   | Valvuloplasty (other than mitral valvuloplasty)  | No                    |                       |               |
| 5829   | Replacement of mitral valve (includes valvuloplasty)   | No                    |                       |               |
| 5832   | Replacement of aortic valve (includes valvuloplasty)   | No                    |                       |               |
| 5833   | Replacement of tricuspid valve (includes valvuloplasty)  | No                    |                       |               |
| 5834   | Replacement of pulmonary valve (includes valvuloplasty/ valvotomy)   | No                    |                       |               |
| 5837   | Closed valvotomy   | No                    |                       |               |
| 5839   | Double valves  | No                    |                       |               |
| 5841   | Removal of obstruction from structure adjacent to valve of heart   | No                    |                       |               |
| 5842   | Triple valves  | No                    |                       |               |
| 5855   | Annuloplasty   | No                    |                       |               |
| 5959   | Revision of valve surgery  | No                    |                       |               |
| 333424 | Percutaneous transcatheter mitral valve repair (leaflet coaptation), including fluoroscopy, angiography, transseptal puncture and echocardiography (TOE) | Yes                   |                       |               |

## VENTRICLES

| CODE | DESCRIPTION  | PRE-APPROVAL REQUIRED | PAYMENT INDICATORS | PAYMENT RULES |
|------|--|-----------------------|--------------------|---------------|
| 5854 | Map guided surgery for ventricular arrhythmias                 | No                    |                    |               |
| 5857 | Left ventricular aneurysmectomy                                | No                    |                    |               |
| 5859 | Insertion, management and removal of ventricular assist device | No                    |                    |               |
| 5958 | Revision closure of defect of intra ventricular septum         | No                    |                    |               |

## VESSELS

| CODE | DESCRIPTION   | PRE-APPROVAL<br>REQUIRED | PAYMENT INDICATORS | PAYMENT RULES   |
|------|---|--------------------------|--------------------|---|
| 5055 | Aortic endarterectomy   | No                       |                    | Only for Irish Life Health approved brands of stimulators |
| 5075 | Blalock operation   | No                       |                    |   |
| 5092 | Venotomy and insertion of filter into the inferior vena cava (includes venogram)  | No                       |                    |   |
| 5118 | Atherectomy (open and Minimally Invasive)   | No                       |                    |   |
| 5125 | Ascending aorta graft, with cardiopulmonary bypass, with aortic root replacement and coronary reconstruction  | No                       |                    |   |
| 5126 | Transverse arch graft, with cardiopulmonary bypass  | No                       |                    |   |
| 5127 | Descending thoracic aorta graft, open or endovascular, with or without bypass, with or without coverage of left subclavian artery origin, plus descending thoracic aortic origin extension(s), if required to level of coeliac origin | No                       |                    |   |
| 5128 | Repair of thoracoabdominal aortic aneurysm with graft, with or without cardiopulmonary bypass   | No                       |                    |   |
| 5143 | Repair of hypoplastic or interrupted aortic arch using autogenous or prosthetic material; without cardiopulmonary bypass  | No                       |                    |   |
| 5144 | Repair of hypoplastic or interrupted aortic arch using autogenous or prosthetic material; with cardiopulmonary bypass   | No                       |                    |   |
| 5146 | Ascending aorta graft, with cardiopulmonary bypass, with or without valve suspension  | No                       |                    |   |
| 5147 | Ascending aorta graft, with cardiopulmonary bypass, with or without valve suspension; with coronary reconstruction  | No                       |                    |   |
| 5180 | Pott's operation  | No                       |                    |   |
| 5219 | Trans thoracic electro-cautery of subclavian lymph nodes  | No                       |                    |   |
| 5811 | Atrial inversion for transposition of great vessels   | No                       |                    |   |
| 5812 | Other correction of transposition of great vessels  | No                       |                    |   |
| 5852 | Correction of anomalous coronary arteries   | No                       |                    |   |
| 5861 | Insertion, maintenance and removal of aortic counterpulsation balloon pump  | No                       |                    |   |
| 5870 | Myocardial aneurysmectomy   | No                       |                    |   |
| 5871 | Open correction of patent ductus arteriosus   | No                       |                    |   |
| 5879 | Correction of truncus arteriosus  | No                       |                    |   |
| 5882 | Closed correction of patent ductus arteriosus   | No                       |                    |   |
| 5883 | Creation of shunt to pulmonary artery from aorta using interposition tube prosthesis  | No                       |                    |   |
| 5884 | Pulmonary artery banding  | No                       |                    |   |
| 5886 | Connection to pulmonary artery from aorta   | No                       |                    |   |

## VESSELS

| CODE | DESCRIPTION  | PRE-APPROVAL REQUIRED | PAYMENT INDICATORS | PAYMENT RULES |
|------|--|-----------------------|--------------------|---------------|
| 5887 | Creation of shunt to pulmonary artery from subclavian artery using interposition tube prosthesis | No                    |                    |               |
| 5888 | Connection to pulmonary artery from subclavian artery  | No                    |                    |               |
| 5889 | Repair of pulmonary artery/ PA De Banding  | No                    |                    |               |
| 5892 | Pulmonary embolectomy  | No                    |                    |               |
| 5893 | Open operations on pulmonary artery  | No                    |                    |               |
| 5957 | Revision repair of coarctation of aorta  | No                    |                    |               |

## OTHER CARDIAC / THORACIC SURGERIES

| CODE | DESCRIPTION   | PRE-APPROVAL REQUIRED | PAYMENT INDICATORS | PAYMENT RULES |
|------|---|-----------------------|--------------------|---------------|
| 5804 | Operation on lymphatic duct                                     | No                    |                    |               |
| 5808 | Transplantation of heart  | No                    |                    |               |
| 5809 | Correction of Tetralogy of Fallot                               | No                    |                    |               |
| 5813 | Correction of total anomalous pulmonary venous connection       | No                    |                    |               |
| 5822 | Creation of valved cardiac conduit                              | No                    |                    |               |
| 5823 | Creation of other cardiac conduit                               | No                    |                    |               |
| 5827 | Excision of cardiac tumour                                      | No                    |                    |               |
| 5828 | Staged correction of hypoplastic left heart syndrome, per stage | No                    |                    |               |
| 5873 | Decompression of cardiac tamponade (re. operation for bleeding) | No                    |                    |               |