



Irish Life
health

Schedule
of Benefits
for Professional
Fees 2021

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	No		Conditions of payment for code 5033 are as follows: (a) 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 (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	No		
5231	Percutaneous drainage of empyema	No		
5235	Paracentesis thoracis with intercostal drain (I.P.)	No	Independent Procedure, Diagnostic	
5250	Pleurodesis	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	No		
5944	Open excision of lesion of lung	No		
5946	Decortication of pleura or lung, open or thorascopic	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, VATS, open or robotic approach	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) for total pneumonectomy with lymphadenectomy	No		
325983	Video-assisted thoracoscopic surgery (VATS) 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, Day Care, Diagnostic	Where code 2004 or code 2113 is performed on the same day but in a different physical location in the hospital with gap of 2 hours or more, 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, Day Care, Diagnostic	Where code 1994 is performed on the same day but in a different physical location in the hospital with gap of 2 hours or more, the payment indicator "Independent Procedure" will not apply for consultant fees only.
2012	Bronchoscopy with or without bronchial biopsy (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, Day Care, Diagnostic	
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, Day Care, Diagnostic	
2020	Bronchoscopy with removal of foreign body (I.P.)	No	Independent Procedure, Diagnostic	Includes foreign body removal by rigid endoscopy
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, Side Room, Diagnostic	To be eligible for this benefit, the rules from codes 1999 & 2113 apply plus the procedures must be performed: (a) On the same day and (b) In the same approved Irish Life Health approved hospital and (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 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 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, 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	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 REQUIRED	PAYMENT INDICATORS	PAYMENT RULES
5055	Aortic endarterectomy	No		
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 or without valve suspension, with cardiopulmonary bypass	No		
5147	Ascending aorta graft, with or without valve suspension, coronary reconstruction, with cardiopulmonary bypass	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		