

Gynaecology

Schedule of Benefits
for Professional Fees

ANAESTHESIA

Code	Description	Payable with Private Rooms Technical Benefit	Pre-Approval Required	Payment Rules
2207	Epidural anaesthesia for vaginal delivery	No	No	If billed by anaesthesiologists with 2190, both can be paid at 100%. Supporting documentation must be included in claim form to support both procedures
2208	General anaesthetic for complications of full-term delivery requiring operative intervention in theatre	No	No	Benefit for procedure code 2208 is payable when one of the following complications of full term delivery arise: (a) Retained placenta with or without suturing of perineum (b) Vulval haematoma at the time of delivery (c) Primary or secondary post-partum haemorrhage.

CERVIX

Code	Description	Payable with Private Rooms Technical Benefit	Pre-Approval Required	Payment Rules
2140	Cervix, amputation of (I.P.)	No	No	
2145	Cervix, biopsy of (I.P.)	No	No	
2146	Cervix, cone biopsy of (I.P.)	No	No	
2150	Cervical polyps, removal of (I.P.)	No	No	
2151	Knife cone biopsy of cervix (I.P.)	No	No	
2152	Radical trachelectomy, with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling biopsy, with or without removal of tube(s), with or without removal of ovary(s) (I.P.)	No	No	
2155	Cervix, dilatation of (I.P.)	No	No	
2160	Cervix, local excision of lesion (I.P.)	Yes	No	
2170	Cervix, suture of (I.P.)	Yes	No	
2171	Cervical cerclage (I.P.)	Yes	No	
2172	Cerclage of cervix, during pregnancy through abdominal incision (I.P.)	Yes	No	
2175	Cervix, cautery of (I.P.)	Yes	No	
2180	Cervix, examination when medically necessary to perform under anaesthesia (I.P.)	No	No	
2181	Colposcopy (I.P.)	Yes	No	
2182	Colposcopy with Lletz procedure for lesion removal and/or laser therapy (I.P.)	Yes	No	
2183	Colposcopy and diagnostic biopsy (I.P.)	Yes	No	
2184	Colposcopy and therapeutic loop electrode biopsy(s) of the cervix (I.P.)	Yes	No	

CERVIX

Code	Description	Payable with Private Rooms Technical Benefit	Pre-Approval Required	Payment Rules
574158	Colpopexy Intraperitoneal approach (I.P.)	No	No	

FOETAL MEDICINE

Code	Description	Payable with Private Rooms Technical Benefit	Pre-Approval Required	Payment Rules
2209	Chorionic villus sampling with ultrasound guidance	Yes	No	Benefit under procedure codes 2209 and 2211 is payable for patients at high risk for foetal aneuploidy foetal anaemia or foetal thrombocytopenia following one or more investigations: (a) Abnormal ultrasound findings (b) Abnormal pregnancy serum tests (c) Patients with Rhesus or Kell sensitisation (d) Prior history of foetal abnormalities (e) Symptoms or signs suggestive of intrauterine infection Benefit under procedure codes 2209, 2211, 2213, 2214, 2216 and 2218 is payable where the procedure is performed by a Consultant Obstetrician following referral from the attending consultant.
2211	Amniocentesis, with ultrasound guidance	Yes	No	Benefit under procedure codes 2209 and 2211 is payable for patients at high risk for foetal aneuploidy foetal anaemia or foetal thrombocytopenia following one or more investigations: (a) Abnormal ultrasound findings (b) Abnormal pregnancy serum tests (c) Patients with Rhesus or Kell sensitisation (d) Prior history of foetal abnormalities (e) Symptoms or signs suggestive of intrauterine infection Benefit under procedure codes 2209, 2211, 2213, 2214, 2216 and 2218 is payable where the procedure is performed by a Consultant Obstetrician following referral from the attending consultant.
2213	Foetal fluid drainage (e.g. vesicocentesis, thoracentesis, paracentesis), including ultrasound guidance, diagnostic or therapeutic (I.P.)	No	No	Benefit under procedure codes 2209, 2211, 2213, 2214, 2216 and 2218 is payable where the procedure is performed by a consultant Obstetrician following referral from the attending consultant
2214	Transfusion, intrauterine, foetal, with ultrasound guidance, to treat confirmed foetal anaemia or thrombocytopenia	No	No	Benefit under procedure codes 2209, 2211, 2213, 2214, 2216 and 2218 is payable where the procedure is performed by a consultant Obstetrician following referral from the attending consultant
2216	Advanced foetal ultrasound, real time with image documentation, detailed foetal and maternal anatomical examination, only payable following referral by the initial Obstetrician for a documented suspected abnormality identified by a prior ultrasound (I.P.)	Yes	No	Benefit under procedure codes 2209, 2211, 2213, 2214, 2216 and 2218 is payable where the procedure is performed by a consultant Obstetrician following referral from the attending consultant
2217	Fetoscopic surgery, using a fetoscope or shunt, and ultrasound guidance, to correct structural malformations	No	No	Benefit for procedure 2217 is payable where the procedure is performed by a consultant Obstetrician following referral from the attending Consultant for the following indications: (a) In-utero repair of urinary tract obstruction (b) In-utero repair of congenital cystic adenomatoid malformation (c) In-utero repair of extralobar pulmonary sequestration (d) In-utero repair of sacrococcygeal teratoma (e) Fetoscopic laser therapy for treatment of twin-twin transfusion syndrome.
2218	Advanced foetal ultrasound, real time with image documentation, details foetal and maternal anatomical examination; immediately followed by amniocentesis when an abnormality has been detected (I.P.)	No	No	Benefit under procedure codes 2209, 2211, 2213, 2214, 2216 and 2218 is payable where the procedure is performed by a consultant Obstetrician following referral from the attending consultant

OBSTETRICS

Code	Description	Payable with Private Rooms Technical Benefit	Pre-Approval Required	Payment Rules
2185	Caesarean hysterectomy	No	No	
2190	Caesarean section (grant in aid for obstetrician's fees, only payable when the consultant obstetrician performs the procedure)	No	No	
2200	Ectopic pregnancy, surgical management (laparoscopic or open): salpingectomy and/ or salpingo oophorectomy, unilateral or bilateral	No	No	
2206	Vaginal delivery (grant in aid), only payable when the consultant obstetrician is present for the delivery	No	No	

UTERUS AND ADNEXA

Code	Description	Payable with Private Rooms Technical Benefit	Pre-Approval Required	Payment Rules
2225	Dilatation and curettage (diagnostic or therapeutic) (I.P.)	Yes	No	
2235	Microsurgical repair of extensive tubal and peritubal disease consequent on pelvic inflammatory disease and endometriosis including re-implantation of fallopian tube, unilateral	No	No	
2240	Microsurgical repair of extensive tubal and peritubal disease consequent on pelvic inflammatory disease and endometriosis including re-implantation of fallopian tubes, bilateral	No	No	
2241	Surgical repair of extensive tubal and peritubal disease consequent on pelvic inflammatory disease or endometriosis, unilateral or bilateral	No	No	
2244	Hysteroscopy with sampling of endometrium and/ or polypectomy, with or without dilatation and curettage, with removal of leiomyomata (I.P.)	No	No	
2246	Hysteroscopy with insertion of intrauterine device for menorrhagia (not for contraceptive purposes) (I.P.)	Yes	No	
2247	Insertion of intrauterine device for menorrhagia, not for contraceptive purposes (I.P.)	Yes	No	Out-patient. For procedure code 2247, benefit is only payable following a previous claim for hysteroscopy (code 2244, 2248 or 2251).
2248	Hysteroscopy (I.P.)	No	No	
2249	Hysteroscopy, surgical; with complete endometrial resection or ablation for menorrhagia (I.P.)	No	No	
2250	Total abdominal hysterectomy	No	No	
2251	Hysteroscopy, surgical; with sampling (biopsy) of endometrium and/ or polypectomy with or without dilatation and curettage (I.P.)	No	No	
2253	Total vaginal hysterectomy combined with sacrospinous ligament fixation of vagina and both anterior and posterior pelvic floor repair	No	No	
2255	Radical abdominal hysterectomy for malignancy, with bilateral total pelvic and/ or para-aortic lymphadenectomy and para-aortic lymph node sampling (biopsy), with or without salpingo-oophorectomy, with or without removal of tube(s), with or without removal of ovary(s) including robotic approach	No	No	

UTERUS AND ADNEXA

Code	Description	Payable with Private Rooms Technical Benefit	Pre-Approval Required	Payment Rules
2256	Total vaginal hysterectomy combined with anterior and posterior pelvic floor repair	No	No	
2257	Total abdominal hysterectomy with unilateral or bilateral salpingo oophorectomy	No	No	
2258	Resection of ovarian malignancy with total abdominal hysterectomy, complete procedure including robotic approach	No	No	
2259	Debulking of ovarian carcinoma with or without omentectomy, complete procedure including robotic approach	No	No	
2260	Sub-total abdominal hysterectomy	No	No	
2264	Total vaginal hysterectomy with urethropexy or urethroplasty (I.P.)	No	No	
2265	Total vaginal hysterectomy	No	No	
2267	Total vaginal hysterectomy and anterior or posterior pelvic floor repair (I.P.)	No	No	
2268	Total vaginal hysterectomy with bilateral salpingo-oophorectomy (I.P.)	No	No	
2269	Total vaginal hysterectomy combined with sacrospinous ligament fixation of vagina and anterior or posterior pelvic floor repair (I.P.)	No	No	
2280	Myomectomy (multiple) including robotic approach (I.P.)	No	No	
2281	Laparoscopy, surgical, myomectomy (multiple) (I.P.)	No	No	
2285	Myomectomy (simple, single) including robotic approach (I.P.)	No	No	
2286	Laparoscopy, surgical, myomectomy (single) (I.P.)	No	No	
2288	Laparoscopy, surgical; with partial or total oophorectomy and/ or salpingectomy (include biopsy, and peritoneal wall sampling or brushings) unilateral or bilateral (I.P.)	No	No	
2289	Oophorectomy, unilateral or bilateral (complete or partial) (I.P.)	No	No	
2300	Ovarian cystectomy by abdominal approach, unilateral or bilateral (I.P.)	No	No	Ref code 2487 or 2489 if procedure is performed laparoscopically
2319	Salpingectomy complete or partial, unilateral or bilateral (I.P.)	No	No	
2354	Salpingostomy or salpingolysis, abdominal incision, unilateral or bilateral (I.P.)	No	No	Ref code 2487 or 2489 if procedure is performed laparoscopically
2364	Microsurgical tuboplasty (salpingostomy or salpingolysis), unilateral or bilateral (I.P.)	No	No	
2365	Salpingo-oophorectomy, complete or partial, unilateral or bilateral (I.P.)	No	No	
2370	Uterus, plastic reconstruction of	No	No	
2375	Ventrosuspension/ Gilliam's operation (I.P.)	No	No	
2376	Hysterocontrast sonography (HyCoSy)	No	No	

UTERUS AND ADNEXA

Code	Description	Payable with Private Rooms Technical Benefit	Pre-Approval Required	Payment Rules
2377	Endoscopic periurethral injection of bulking agents that are approved by FDA for urinary incontinence (I.P.)	Yes	No	Benefit is payable for a maximum of 3 treatments per lifetime
2481	Laparoscopy, surgical, with total hysterectomy, with or without removal of tube(s) and/ or ovary(s) including robotic approach (I.P.)	No	No	
2482	Laparoscopic radical hysterectomy for malignancy, with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling (biopsy), with or without salpingo-oophorectomy including robotic approach (I.P.)	No	No	
2483	Laparoscopy, surgical, vaginal hysterectomy, with or without removal of tube(s) and/ or ovary(s) including robotic approach (I.P.)	No	No	
574154	Laparoscopic total hysterectomy with bilateral salpingo-oophorectomy (I.P.)	No	No	
574155	Laparoscopic sterilisation by ligation of both fallopian tubes, when this sterilisation procedure is recommended by a consultant Obstetrician-Gynaecologist for medical safety reasons due to significant risks to maternal health (I.P.)	No	Yes	
574157	Laparoscopic hysteroscopy (I.P.)	No	No	
576012	Prophylactic total abdominal hysterectomy with bilateral salpingo-oophorectomy	No	Yes	
576020	Salpingo-oophorectomy, risk reducing prophylactic, complete or partial, unilateral or bilateral (I.P.)	No	Yes	Cover must be requested in advance and only by way of the standard template available from Irish Life Health
581413	Prophylactic vaginal hysterectomy with bilateral salpingo-oophorectomy	No	Yes	
586814	Prophylactic open oophorectomy, bilateral	No	Yes	
592215	Prophylactic laparoscopic oophorectomy, bilateral	No	Yes	
597616	Laparoscopic hysterectomy with bilateral pelvic lymphadenectomy (I.P.)	No	No	
603017	Prophylactic laparoscopically assisted vaginal hysterectomy with bilateral salpingo-oophorectomy	No	Yes	
858405	Laparoscopic sub-total hysterectomy with or without removal of tube(s) and/or ovary(ies)	No	No	

VULVOVAGINAL

Code	Description	Payable with Private Rooms Technical Benefit	Pre-Approval Required	Payment Rules
2380	Atresia vaginae, relief of (including dilatation of vulva and vagina) (I.P.)	No	No	
2385	Bartholin's gland cyst, excision of	Yes	No	
2390	Bartholin's or Skene's gland, abscess of, incision and drainage (I.P.)	Yes	No	
2395	Caruncle, vulvovaginal, removal of (I.P.)	Yes	No	

VULVOVAGINAL

Code	Description	Payable with Private Rooms Technical Benefit	Pre-Approval Required	Payment Rules
2400	Colporrhaphy with amputation of cervix, anterior and posterior (Manchester or Fothergill operation) (I.P.)	No	No	
2410	Colpotomy	No	No	
2411	Laparoscopy, surgical, sacrocolpopexy including robotic approach (I.P.)	No	No	
2415	Cystocele, repair of (I.P.)	No	No	
2420	Cystocele and rectocele, repair of (including colpoperineorrhaphy)	No	No	
2425	Cysts or simple tumours of the vulva or vagina, excision of	Yes	No	
2426	Repair of enterocele, vaginal or abdominal approach (I.P.)	No	No	
2430	Hymenotomy (I.P.)	Yes	No	
2435	Hymenectomy (I.P.)	Yes	No	
2440	Perineal tear, (excludes child birth and 1st of 2nd degree tears) complete, repair of (I.P.)	No	No	
2441	Partial vaginectomy (I.P.)	No	No	
2444	Retropubic urethropexy or vesicourethropexy (including colposuspension) (e.g. Burch, MMK)	No	No	
2445	Rectocele, repair of (I.P.)	No	No	
2450	Abdomino-vaginal suspension of bladder neck for stress incontinence (e.g. Stamey, Raz)	No	Yes	
2461	Closure of rectovaginal fistula; vaginal or transanal approach (I.P.)	No	No	
2462	Closure of rectovaginal fistula; abdominal approach with or without colostomy (I.P.)	No	No	
2465	Vaginal fistulae (vesico vaginal), repair of	No	No	
2470	Vaginal wall, suture of non-obstetrical tear due to trauma	No	No	
2471	Sacrospinous ligament fixation for prolapse of vagina (I.P.)	No	No	
2472	Colpopexy, intra-peritoneal approach (uterosacral, levator myorrhaphy) (I.P.)	No	No	Where procedure code 2472 or 2474 is carried out at the same time as a hysterectomy, code 2267 will apply
2473	Colpocleisis (Le Fort type)	No	No	
2474	Colpopexy, vaginal; extra - peritoneal approach (sacrospinous, iliocygeus) (I.P.)	No	No	Where procedure code 2472 or 2474 is carried out at the same time as a hysterectomy, code 2267 will apply
2480	Vulvectomy, simple, without glands	No	No	

VULVOVAGINAL

Code	Description	Payable with Private Rooms Technical Benefit	Pre-Approval Required	Payment Rules
2484	Diagnostic laparoscopy with or without biopsy, with or without tubal irrigation/ insufflation (I.P.)	No	No	
2485	Vulvectomy, radical, with glands	No	No	
2487	Laparoscopy with or without biopsy and one or more of the following procedures: excision of lesions of ovary(ies); (ovarian cystectomy), solid tumours (e.g. large endometriomas or dermoid) pelvic viscera or peritoneal surface; diathermy of endometriosis; division of adhesions; puncture of cysts. This procedure may or may not include tubal irrigation/ insufflation (I.P.)	No	No	
2488	Laparoscopy with or without biopsy. This procedure also includes dilatation and curettage (diagnostic or therapeutic), with or without tubal irrigation/ insufflation (I.P.)	No	No	
2489	Laparoscopy with or without biopsy and one or more of the following procedures: excision of lesions of ovary(ies) (ovarian cystectomy), solid tumours (e.g. large endometrioma or dermoid); pelvic viscera or peritoneal surface; diathermy of endometriosis; division of adhesions; puncture of cysts; lymph nodes sampling (biopsy) single or multiple. This procedure also includes dilatation and curettage (diagnostic or therapeutic), with or without tubal irrigation/ insufflation including robotic approach (I.P.)	No	No	
257295	Removal and repair of mesh devices in uro-gynaecological procedures	No	Yes	Only payable to consultant gynaecologists on specialist register in designated HSE facilities - NMHS, SVUH, CUH
574156	Laparoscopic colpopexy (I.P.)	No	No	
598511	Termination by Dilatation and curettage (I.P.)	No	No	
598512	Termination by one or more amniocentesis injections (including delivery of foetus and secundines) (I.P.)	No	No	
598513	Termination by one of more vaginal suppositories (including delivery of foetus and secundines) (I.P.)	Yes	No	
598600	Radical peritoneal dissection and excision of extensive endometriosis, metastatic deposits or mucinous tumours, typically involving resection of lesions from a number of organs, dissection and preservation of ureters, ovaries and fallopian tubes, bowel resection and reanastomoses, excision and repair of intraabdominal organs and including instillation of therapeutic agents where appropriate(I.P.)?	No	No	