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| **Treatments & Procedures** | **Status** | **Date Ratified by CPDG/JSCC** | **Procedure Codes** |
| Abdominoplasty/Apronectomy | IFR | 16.04.19 | S02.1, S02.2, S02.8, S02.9S02.1 – AbdominoplastyS02.2 – AbdominolipectomyS02.8 – Other specified plastic excision of skin of abdominal wallS02.9 – Unspecified plastic excision of skin of abdominal wall |
| Achilles Tendonopathy  | Threshold | 29.2.20 | N/A |
| Acupuncture | IFR | 15.10.19 | A70.6A70.6 – Acupuncture NEC |
| Adenoidectomy (see Grommets Policy) | Threshold | 28.7.20 | E20.1, E20.4 |
| Aesthetic/Cosmetic Breast Surgery  Listed as: Breast surgery Aesthetic/Cosmetic | IFR & Threshold | 20.8.19 | Surgical treatment of inverted nipplesB35.6 ICD N64.5, Q83.8, O92.0B35.6 – eversion of nippleHypoplasia or Aplasia of breast(s)B30.1, B30.2, B30.4, B31.2B30.1 – Insertion of prosthesis for breastB30.2 – Revision of prosthesis for breastB30.4 – Renewal of prosthesis for breastB31.2 – Augmentation mammoplastyBreast reductionB31.1B31.1 – Reduction mammoplastyZ49.1 - N62XPtosis/MastopexyB31.3 – MastopexyBreast augmentationB31.2, B31.4, B30.1, B30.3, B30.8B31.2 – Augmentation mammoplastyB31.4 – Revision of mammoplastyB30.1 – Insertion of prosthesis for breastB30.8 – Other specified prosthesis of breast followed by Y03.2 Renewal of prosthesis in organImplant removalB30.3 – Removal of prosthesis for breastB311B375Y032Implant replacementB30.2, B30.4B30.2 – Revision of prosthesis for breastB30.4 – Renewal of prosthesis for breast |
| Assisted Conception- NEW | Threshold | Effective 03.06.19Under review but policy still effective | n/a |
| Bariatric Surgery | IFR | 12.01.17 | n/a |
| Benign Skin Lesions and Other Skin Conditions in Adults/Children (removal of)  | Threshold | 11.3.21 | S06.5 – Excision of lesion of skin of head or neck NECS06.9 – Unspecified other excision of lesion of skin S09.1 - Laser destruction of lesion of skin of head or neckS09.2 – Laser destruction of lesion of skin NECS09.3 – Photodestruction of lesion of skin of head or neck NECS09.4 – Infrared photocoagulation of lesion of skin of head or neckS09.5 – Infrared photocoagulation of lesion of skin NECS09.8 – Other specified photodestruction of lesion of skinS09.9 – Unspecified photodestruction of lesion of skinS041 Excision of sweat gland bearing skin of axillaS042 Excision of sweat gland bearing skin of groinS043 Excision of sweat gland bearing skin NECS048 Other specified other excision of skinS049 Unspecified other excision of skinS051 Microscopically controlled excision of lesion of skin of head or neck using fresh tissue techniqueS052 Microscopically controlled excision of lesion of skin using fresh tissue technique NECS053 Microscopically controlled excision of lesion of skin of head or neck using chemosurgical techniqueS054 Microscopically controlled excision of lesion of skin using chemosurgical technique NECS055 Microscopically controlled excision of lesion of skin of head or neck NECS058 Other specified microscopically controlled excision of lesion of skinS059 Unspecified microscopically controlled excision of lesion of skin |
| Bobath Therapy for Children with Cerebral Palsy | IFR | 19.5.20 | n/a |
| Buttock Lift | IFR | 16.04.19 | S03.1S03.1 - Buttock lift |
| Calf Implants | IFR | 16.04.19 | S62.8 + Y02.2 |
| Carpal Tunnel Syndrome (conservative and surgical management of)  | Threshold | Revised Awaiting GB approval May 21 | A65.1A65.1 - Carpal tunnel releaseA658 Other specified release of entrapment of peripheral nerve at wristA659 Unspecified release of entrapment of peripheral nerve at wrist |
| Cataract SurgeryIncluding Policy for Toric Lens  | Threshold | 16.04.19 | C71.1, C71.2, C71.3, C71.8, C71.9, C72.1, C72.2, C72.3, C72.8, C72.9, C73.1, C73.2, C73.3, C73.4, C73.8, C73.9, C74.1, C74.2, C74.3, C74.8, C74.9, C75.1, C75.2, C75.3, C75.4, C75.8, C75.9, C77.1, C77.2, C77.3, C77.8, C77.9C71.1 - Simple linear extraction of lensC71.2 - Phacoemulsification of lensC71.3 - Aspiration of lensC71.8 - Other specified extracapsular extraction of lensC71.9 - Unspecified extracapsular extraction of lensC72.1 - Forceps extraction of lens C72.2 - Suction extraction of lensC72.3 - Cryoextraction of lensC72.8 - Other specified intracapsular extraction of lensC72.9 - Unspecified intracapsular extraction of lensC73.1 - Membranectomy of lensC73.2 - Capsulotomy of anterior lens capsuleC73.3 - Capsulotomy of posterior lens capsuleC73.4 - Capsulotomy of lens NECC73.8 - Other specified incision of capsule of lensC73.9 - Unspecified incision of capsule of lensC74.1 - Curettage of lensC74.2 - Discission of cataractC74.3 - Mechanical lensectomyC74.8 - Other specified other extraction of lensC74.9 - Unspecified other extraction of lensC75.1 - Insertion of prosthetic replacement for lens NECC75.2 - Revision of prosthetic replacement for lensC75.3 - Removal of prosthetic replacement for lensC75.4 - Insertion of prosthetic replacement for lens using suture fixationC75.8 - Other specified prosthesis of lensC75.9 - Unspecified prosthesis of lensC77.1 – CapsulectomyC77.2 – Couching of lensC77.3 – Biopsy of lesion of lensC77.8 – Other specified other operation on lensC77.9 – Unspecified other operation on lens |
| Chalazion (surgical management of) | Threshold | 28.7.20 | C12.1, C12.4, C19.1 ICD – H00.1C12.1 – Excision of lesion of eyelid NECC12.4 – Curettage of lesion of eyelidC19.1 – Drainage of lesion of eyelidC122 Cauterisation of lesion of eyelidC222 C222: Biopsy of lesion of eyelid |
| Cholecystectomy for Asymptomatic Gallstones  | IFR | 12.12.20 | J18.1, J18.2, J18.3, J18.4, J18.5, J18.8, J18.9, J21.1, J21.8, J21.9J18.1 - Total cholecystectomy and excision of surrounding tissueJ18.2 - Total cholecystectomy and exploration of common bile ductJ18.3 - Total cholecystectomy NECJ18.4 - Partial cholecystectomy and exploration of common bile ductJ18.5 - Partial cholecystectomy NECJ18.8 - Other specified excision of gall bladderJ18.9 - Unspecified excision of gall bladderJ21.1 - Open removal of calculus from gall bladderJ21.8 - Other specified incision of gall bladderJ21.9 - Unspecified incision of gall bladder |
| Circumcision | Threshold | 20.8.19 | N30.3, N30.8, N30.9N30.3 – CircumcisionN30.8 – Other specified operations on prepuce.N30.9 – Unspecified operations on prepuce |
| Corticosteroid Injections for Chronic Hip Pain  | Threshold | Under review – May CPDG  | W903: Injection of therapeutic substance into jointZ843: Hip joint |
| Corneal Collagen Cross-Linking for Keratoconus | Threshold | 16.04.19 | C51.8, Y37.1ICD - H18.6 or Q13.4 or Q90 and H19.8AC51.8 – Other specified other operations on corneaY37.1 – Introduction of photodynamic substance into organ NOC |
| Cosmetic Skin Procedures (including laser treatment and tattoo removal)Policy removed from KA as covered within Benign Skin Lesion Policy V3. Removed 27.2.19 | IFR |  | S09.1, S09.2, S09.3, S09.4, S09.5, S09.8, S09.9S09.1 - Laser destruction of lesion of skin of head or neckS09.2 – Laser destruction of lesion of skin NECS09.3 – Photodestruction of lesion of skin of head or neck NECS09.4 – Infrared photocoagulation of lesion of skin of head or neckS09.5 – Infrared photocoagulation of lesion of skin NECS09.8 – Other specified photodestruction of lesion of skinS09.9 – Unspecified photodestruction of lesion of skinOR S065 S069 ICD L700 L701 L702 L703 L704 L705 L708 L709 L730 L905 L910  |
| Cosmetic Excision of Skin of Head or Neck | Threshold | 20.8.19 | S01.1, S01.2, S01.3, S01.4, S01.5, S01.6, S01.8, S01.9S01.1 - Facelift and tightening of platysmaS01.2 - Facelift NECS01.3 - Submental lipectomyS01.4 - Browlift NECS01.5 - Direct browliftS01.6 - Internal browliftS01.8 - Other specified Plastic Excision of Skin of Head or NeckS01.9 - Unspecified Plastic Excision of Skin of Head or Neck |
| Cryopreservation of Sperm, Oocytes & Embryos V3 | Threshold | 18.2.20 | n/a |
| D & C – Separate Policy  | IFR | 16.4.19 | Q10.3, Q10.8, Q18.8, Q18.9ICD – N92.0, N92.1Q10.3 – Dilation of cervix uteri and curettage of uterus NECQ10.8 – Other specified curettage of uterusQ18.8 – Other specified diagnostic endoscopic examination of uterusQ18.9 – Unspecified diagnostic endoscopic examination of uterus |
| Dupuytren’s Contracture (surgical treatment of) | Threshold | Under Review – May CPDG | T52.1,T52.2,T54.1T52.1 – Palmar fasciectomy T52.2 – Revision of palmar fasciectomyT54.1 – Division of palmar fasciaT525 Digital fasciectomyT526 Revision of digital fasciectomyT528 Other specified excision of other fasciaT529 Unspecified excision of other fasciaT548 Other specified division of fasciaT549 Unspecified division of fasciaT558 Other specified release of fasciaT559 Unspecified release of fasciaT561 DermofasciectomyT562 Revision of dermofasciectomyT571 Freeing of adhesions of fasciaT574 Stripping of fascia |
| Dynamic Lycra Splinting  | IFR | 17.11.19 | N/A |
| Epidural Injections Listed as:-Steroidal Epidural Injections for Patients with Acute and Severe Sciatica | Threshold | 14.3.19 | A52.1, A52.2, A52.8, A52.9 |
| Eyelid Ectropion | Threshold | 16.04.19 | C15.1, C15.4C15.1 - Correction of ectropion NECC15.4 - Correction of cicatricial ectropionC15.2 |
| Eyelid Ptosis  | Threshold | 16.04.19 | C18.1, C18.2, C18.3, C18.4, C18.5, C18.6, C18.8, C18.9C18.1 – Correction of ptosis of eyelid using levator muscle techniqueC18.2 – Correction of ptosis of eyelid using frontalis muscle techniqueC18.3 – Correction of ptosis of eyelid using sling of fasciaC18.4 – Correction of ptosis of eyelid using superior rectus muscle techniqueC18.5 – TarsomullerectomyC18.6 – Correction of ptosis of eyelid using aponeurosis techniqueC18.8 – Other specified correction of ptosis of eyelidC18.9 – Unspecified correction of ptosis of eyelid |
| Epiphora – Dacryocystorhinostomy (treatment of) | Threshold | 16.04.19 | C25.3, C25.4C25.3 - Dacryocystorhinostomy and insertion of tube HFQC25.4 - Dacryocystorhinostomy NEC |
| Epiphora – Punctocanaliculoplasty (treatment of) | Threshold | 16.04.19 | C27.2, C29.2C27.2 - Dilation of nasolacrimal duct C29.2 - Enlargement of lacrimal punctum |
| Epiphora – Syringing (treatment of)This treatment no longer clinically appropriate – removed from policy | Threshold |  |  |
| Extracorporeal Shockwave Therapy | IFR | 20.8.19 | T57.8 Other specified other operations on fascia Y53.2 |
| Exogen Bone Healing | IFR | 15.10.19 | U132 |
| Female Genital / Pelvic Organ Prolapse (surgical management of) | Threshold | 17.11.19 | P22.1, P22.2, P22.3, P22.8, P22.9, P23.1, P23.2, P23.3, P23.4, P23.5, P23.6, P23.7, P23.8, P23.9P22.1 - Anterior and posterior colporrhaphy and amputation of cervix uteriP22.2 - Anterior colporrhaphy and amputation of cervix uteri NECP22.3 - Posterior colporrhaphy and amputation of cervix uteri NECP22.8 - Other specifiedP22.9 - Unspecified Includes: Colporrhaphy and amputation of cervix uteri NECP23.1 - Anterior and posterior colporrhaphy NECP23.2 - Anterior colporrhaphy NECP23.3 - Posterior colporrhaphy NECP23.4 - Repair of enterocele NECP23.5 - Paravaginal repairP23.6 - Anterior colporrhaphy with mesh reinforcementP23.7 - Posterior colporrhaphy with mesh reinforcementP23.8 - Other specifiedP23.9 - Unspecified Includes: Colporrhaphy NECP28.8P28.9 |
| Functional Electrical Stimulation (FES) | IFR | 28.7.20 | A701, A702, A703, A704, A708, A709, Y901 |
| Ganglion & Mucoid Cyst (surgical management of) | Threshold | 19.02.19 | T59.1, T59.2, T59.3, T59.4, T59.8, T59.9, T60.1, T60.2, T60.3, T60.4, T60.8, T60.9T59.1 – Excision of ganglion of wristT59.2 – Excision of ganglion of hand NECT59.3 – Excision of ganglion of kneeT59.4 – Excision of ganglion of footT59.8 – Other specified excision of ganglionT59.9 – Unspecified excision of ganglionT60.1 – Re-excision of ganglion of wristT60.2 – Re-excision of ganglion of hand NECT60.3 – Re-excision of ganglion of kneeT60.4 – Re-excision of ganglion of footT60.8 – Other specified re-excision of ganglionT60.9 – Unspecified re-excision of ganglion |
| Gastro-electrical Stimulation (GES) for severe Gastroparesis | IFR | No policy required. Funded by NHS E | A70.1, Z27.2A70.1 – Implantation of neurostimulator into peripheral nerveZ27.2 – Stomach |
| Gilmores Groin (within Hernia policy) | IFR | 19.5.20 | N/A - within Hernia Policy |
| Grommets (Adults) | Threshold | 28.7.20 | D15.1 – Myringotomy with insertion of ventilation tube through tympanic membrane, D158, D159, D202, D203, D208, D209, D288, D289 |
| Grommets (Children) | Threshold | 28.7.20 | D15.1 – Myringotomy with insertion of ventilation tube through tympanic membrane, D158, D159, D202, D203, D208, D209, D288, D289 |
| Hair Replacement, Wigs | IFR | 28.7.20 | S211, S212, S213, S214, S218, S219, S331, S332, S333, S338, S339, S341, S342, S348, S349 |
| Haemorrhoids (surgical management of) | Threshold | 28.7.20 | H51.1, H51.2, H51.3, H51.8, H51.9, H52.1, H52.2, H52.3, H52.4, H52.8, H52.9, H53.2, H53.3, H53.8, H53.9H51.1 – HaemorrhoidectomyH51.2 – Partial internal sphincterotomy for haemorrhoidH51.3 – Stapled haemorrhoidectomyH51.8 – Other specified excision of haemorrhoidH51.9 – Unspecified excision of haemorrhoidH52.1 – Cryotherapy to haemorrhoidH52.2 – Infrared photocoagulation of haemorrhoidH52.3 – Injection of sclerosing substance in to haemorrhoidH52.4 – Rubber band ligation of haemorrhoidH52.8 – Other specified destruction of haemorrhoidH52.9 – Unspecified destruction of haemorrhoidH53.2 – Forced manual dilation of anus for haemorrhoidH53.3 – Manual reduction of prolapsed haemorrhoidH53.8 – Other specified other operation on haemorrhoidH53.9 – Unspecified other operation on haemorrhoid |
| Hair Removal – Facial Hair Removal in Women  | IFR | 12.11.20 | n/a |
| Hair Removal – Laser Body Hair Removal – NEW  | Threshold | 10.12.20 | S60.6 – Electrolysis of hairS60.7 – Epilation of hair |
| Hallux Valgus (surgical management of Hallux Valgus including Osteotomy) | Threshold | 16.4.19 | W79.1, W15.1, W15.2, W15.3, W15.4, W15.5, W15.6, W15.8, W15.9, W16.1, W59.1, W59.2, W59.3, W59.4, W59.5, W59.6, W59.8, W59.9ICD M20.1, Q66.6W79.1 - Soft tissue correction of hallux valgus Includes: Soft tissue correction of hallux valgus and excision of bunionW15.1 - Osteotomy of neck of first metatarsal boneW15.2 - Osteotomy of base of first metatarsal boneW15.3 - Osteotomy of first metatarsal bone NECW15.4 - Osteotomy of head of metatarsal boneW15.5 - Osteotomy of midfoot tarsal boneW15.6 - Cuneiform osteotomy of proximal phalanx with resection of head of first metatarsalW15.8 - Other specified division of bone of footW15.9 - Unspecified division of bone of footW16.1 - Multiple osteotomy and internal fixation HFQW59.1 - Fusion of first metatarsophalangeal joint and replacement of lesser metatarsophalangeal jointW59.2 - Fusion of first metatarsophalangeal joint and excision of lesser metatarsophalangeal jointW59.3 - Fusion of first metatarsophalangeal joint NECW59.4 - Fusion of interphalangeal joint of great toeW59.5 - Fusion of interphalangeal joint of toe NECW59.6 - Revision of fusion of joint of toeW59.8 - Other specified Fusion of Joint of ToeW59.9 - Unspecified Fusion of Joint of Toe |
| Hernia ( including Gilmores Groin) | Threshold | 19.5.20 | T20.1, T20.2, T20.3, T20.4, T20.8, T20.9, T21.1, T21.2, T21.3, T21.4, T21.8, T21.9, T24.1, T24.2, T24.3, T24.4, T24.8, T24.9, T97.1, T97.2, T97.3, T97.8, T97.9, T25.1, T25.2, T25.3, T25.8, T25.9, T26.1, T26.2, T26.3, T26.4, T26.8, T26.9, T27.1, T27.2, T27.3, T27.4, T27.8, T27.9, T98.1, T98.2, T98.3, T98.8, T98.9T20.1 - Primary repair of inguinal hernia using insert of natural materialT20.2 - Primary repair of inguinal hernia using insert of prosthetic material Includes: Primary repair of inguinal hernia using insert NECT20.3 - Primary repair of inguinal hernia using suturesT20.4 - Primary repair of inguinal hernia and reduction of sliding herniaT20.8 - Other specified primary repair of inguinal herniaT20.9 - Unspecified primary repair of inguinal herniaT21.1 - Repair of recurrent inguinal hernia using insert of natural materialT21.2 - Repair of recurrent inguinal hernia using insert of prosthetic material Includes: Repair of recurrent inguinal hernia using insert NECT21.3 - Repair of recurrent inguinal hernia using suturesT21.4 - Removal of prosthetic material from previous repair of inguinal herniaT21.8 - Other specified Repair of recurrent inguinal herniaT21.9 - Unspecified Repair of recurrent inguinal herniaT24.1 - Repair of umbilical hernia using insert of natural materialT24.2 - Repair of umbilical hernia using insert of prosthetic material Includes: Repair of umbilical hernia using insert NECT24.3 - Repair of umbilical hernia using suturesT24.4 - Removal of prosthetic material from previous repair of umbilical herniaT24.8 - Other specified Primary repair of umbilical herniaT24.9 - Unspecified Primary repair of umbilical herniaT97.1 – Repair of recurrent umbilical hernia using insert of natural materialT97.2 – Repair of recurrent umbilical hernia using insert of prosthetic materialT97.3 – Repair of recurrent umbilical hernia using suturesT97.8 – Other specified repair of recurrent umbilical hernia T97.9 – Unspecified repair of recurrent umbilical hernia T25.1 - Primary repair of incisional hernia using insert of natural materialT25.2 - Primary repair of incisional hernia using insert of prosthetic material Includes: Primary repair of incisional hernia using insert NECT25.3 - Primary repair of incisional hernia using suturesT25.8 - Other specified Primary repair of incisional herniaT25.9 - Unspecified Primary repair of incisional herniaT26.1 - Repair of recurrent incisional hernia using insert of natural materialT26.2 - Repair of recurrent incisional hernia using insert of prosthetic material Includes: Repair of recurrent incisional hernia using insert NECT26.3 - Repair of recurrent incisional hernia using suturesT26.4 - Removal of prosthetic material from previous repair of incisional herniaT26.8 - Other specified Repair of recurrent incisional herniaT26.9 - Unspecified Repair of recurrent incisional herniaT27.1 - Repair of ventral hernia using insert of natural materialT27.2 - Repair of ventral hernia using insert of prosthetic material Includes: Rep air of ventral hernia using insert NECT27.3 - Repair of ventral hernia using suturesT27.4 - Removal of prosthetic material from previous repair of ventral herniaT27.8 - Other specified Repair of other hernia of abdominal wallT27.9 - Unspecified Repair of other hernia of abdominal wallT98.1 - Repair of recurrent ventral hernia using insert of natural materialT98.2 – Repair of recurrent ventral hernia using insert of prosthetic materialT98.3 – Repair of recurrent ventral hernia using suturesT98.8 – Other specified repair of recurrent ventral hernia T98.9 – Unspecified repair of recurrent ventral hernia  |
| Hip Arthroplasty (Primary)  | Threshold | 19.06.18 | W37.1, W38.1, W39.1, W93.1, W94.1, W95.1W37.1 – Primary total prosthetic replacement of hip joint using cementW38.1 – Primary total prosthetic replacement of hip joint not using cementW39.1 – Primary total prosthetic replacement of hip joint NECW93.1 – Primary hybrid prosthetic replacement of hip joint using cemented acetabular componentW94.1 – Primary hybrid prosthetic replacement of hip joint using cemented femoral componentW95.1 – Primary hybrid prosthetic replacement of hip joint using cement NEC |
| Hip Resurfacing | IFR | 15.10.19 | W581 Primary resurfacing of jointW582 Revision of resurfacing arthroplasty of joint in conjunction with Z756 Acetabulum/Z843 Hip jointW581 with a diagnosis of Coxarthrosis |
| HomeopathyPolicy removed from KA – 19.12.18 | IFR |  | n/a |
| Hypnotherapy | IFR | 24.11.20 | n/a |
| Hysterectomy for Heavy Menstrual Bleeding | Threshold | 16.04.19 | Q07.4, Q07.5, Q07.9, Q08.9Q07.4 - Total abdominal hysterectomy NEC Includes: Hysterectomy NECQ07.5 - Subtotal abdominal hysterectomy Q07.9 - Unspecified Abdominal excision of UterusQ08.9 - Unspecified Includes: Vaginal hysterectomy NECQ071 Abdominal hysterocolpectomy and excision of periuterine tissueQ073 Abdominal hysterocolpectomy NECQ076 Excision of accessory uterusQ078 Other specified abdominal excision of uterusQ081 Vaginal hysterocolpectomy and excision of periuterine tissueQ083 Vaginal hysterocolpectomy NECQ088 Other specified vaginal excision of uterusQ089 Unspecified vaginal excision of uterusICD - N92.0, N92.1, N92.2, N92.3, N92.4, N92.5, N92.6 |
| Knee Arthroscopy | Threshold | 19.02.19 | W69.1, W69.2, W69.3, W69.4, W69.8, W69.9, W80.2, W82.1, W82.2, W82.3, W82.8, W82.9, W84.1, W84.2, W84.3, W84.4, W84.5, W84.6, W84.7, W84.8, W84.9, W85.1, W85.2, W87.9, Y76.7, Z84.6W69.1 - Total synovectomyW69.2 - Subtotal synovectomyW69.3 - Partial synovectomyW69.4 - Open biopsy of synovial membrane of jointW69.8 - Other specified open operations on synovial membrane of jointW69.9 - Unspecified open operations on synovial membrane of jointW80.2 - Open debridement of joint NECW82.1 - Endoscopic total excision of semilunar cartilageW82.2 - Endoscopic resection of semilunar cartilage NECW82.3 - Endoscopic repair of semilunar cartilageW82.8 - Other specified therapeutic endoscopic operations on semilunar cartilageW82.9 - Unspecified therapeutic endoscopic operations on semilunar cartilageW84.1 - Endoscopic repair of intra-articular ligamentW84.2 - Endoscopic reattachment of intra-articular ligamentW84.3 - Endoscopic division of synovial plicaW84.4 - Endoscopic decompression of jointW84.5 - Endoscopic drilling of epiphysis for repair of articular cartilageW84.6 - Endoscopic excision of synovial plicaW84.7 - Endoscopic repair of superior labrum anterior to posterior tearW84.8 - Other specified therapeutic endoscopic operations on other joint structureW84.9 - Unspecified therapeutic endoscopic operations on other joint structureW85.1 - Endoscopic removal of loose body from knee jointW85.2 - Endoscopic irrigation of knee jointW87.9 - Unspecified diagnostic endoscopic examination of knee jointY76.7 - Arthroscopic approach to jointZ84.6 - Knee joint |
| Knee Arthroplasty (Primary) | Threshold | 19.06.18 | W40.1, W41.1, W42.1, O18.1 W40.1 – Primary total prosthetic replacement of knee joint using cementW41.1 – Primary total prosthetic replacement of knee joint not using cementW42.1 – Primary total prosthetic replacement of knee joint NECO18.1 - Primary hybrid prosthetic replacement of knee joint using cement |
| Labiaplasty  | IFR | 20.8.19 | P05.5, P05.6, P05.7, P05.5 - Excision of excess labial tissueP05.6 - Reduction labia minorP05.7 - Reduction labia majorZ447Z474 |
| Laser Treatment of Myopia (Short Sightedness) | IFR | 18.6.19 | n/a |
| Lipoma (surgical treatment of) | Threshold | 24.11.20 | B35.3, C10.1, C12.1, D02.1, E09.1, F02.1, N01.2, N24.2, N27.1, P05.4, P11.1, T29.3ICD – D17.0 to D17.3S06.5 - Excision of lesion of skin of head or neck NECS06.9 - Unspecified other excision of skinB35.3 - Extirpation of lesion of nippleC10.1 - Excision of lesion of eyebrowC12.1 - Excision of lesion of eyelid NECD02.1 - Excision of lesion of external earE09.1 - Excision of lesion of external noseF02.1 - Excision of lesion of lipN01.2 - Excision of lesion of scrotumN24.2 - Operations on skin of male perineum NECN27.1 - Excision of lesion of penisP05.4 - Excision of lesion of vulva NECP11.1 - Excision of lesion of female perineumT29.3 - Extirpation of lesion of umbilicus |
| Liposuction including Lipoedema | Threshold | 15.10.19 | S62.1, S62.2S62.1 - Liposuction of subcutaneous tissue of head or neckS62.2 - Liposuction of subcutaneous tissue NEC |
| Low Back Pain – Other Procedures | IFR | 20.8.19 | A51.4, V31.4, V33.8, V36.1, V36.2, V36.3, V55, V56, V57, V62, V63, Y76.3, Y08.3, ~~Y53~~ICD M54.5A51.4 - Endoscopic division of epidural adhesionsV31.4 - Primary percutaneous endoscopic excision of thoracic intervertebral discV33.8 - Other specified Includes: Primary posterior excision of lumbar intervertebral discV36.1 - Prosthetic replacement of cervical intervertebral discV36.2 - Prosthetic replacement of thoracic intervertebral discV36.3 - Prosthetic replacement of lumbar intervertebral discV55.1 - One level of spineV55.2 - Two levels of spineV55.3 - Greater than two levels of spineV55.8 - Other specified Level of SpineV55.9 - Unspecified Level of SpineV56.1 - Primary laser foraminoplasty of cervical spineV56.2 - Primary laser foraminoplasty of thoracic spineV56.3 - Primary laser foraminoplasty of lumbar spineV56.4 - Primary laser foraminoplasty of spine NECV56.8 - Other specified Primary Foraminoplasty of spineV56.9 - Unspecified Primary Foraminoplasty of spineV57.1 - Revisional laser foraminoplasty of cervical spineV57.2 - Revisional laser foraminoplasty of thoracic spineV57.3 - Revisional laser foraminoplasty of lumbar spineV57.4 - Revisional laser foraminoplasty of spine NEC V57.8 - Other specified Revisional Foraminoplasty of spineV57.9 - Unspecified Revisional Foraminoplasty of spineV62.1 - Primary percutaneous intradiscal radiofrequency thermocoagulation to cervical intervertebral discV62.2 - Primary percutaneous intradiscal radiofrequency thermocoagulation to thoracic intervertebral discV62.3 - Primary percutaneous intradiscal radiofrequency thermocoagulation to lumbar intervertebral discV62.8 - Other specified primary percutaneous intradiscal radiofrequency thermocoagulation to intervertebral discV62.9 - Unspecified primary percutaneous intradiscal radiofrequency thermocoagulation to intervertebral discV63.1 - Revisional percutaneous intradiscal radiofrequency thermocoagulation to cervical intervertebral discV63.2 - Revisional percutaneous intradiscal radiofrequency thermocoagulation to thoracic intervertebral discV63.3 - Revisional percutaneous intradiscal radiofrequency thermocoagulation to lumbar intervertebral discV63.8 - Other specified revisional percutaneous intradiscal radiofrequency thermocoagulation to intervertebral discV63.9 - Unspecified revisional percutaneous intradiscal radiofrequency thermocoagulation to intervertebral discY76.3 - Endoscopic approach to other body cavityY08.3 - Laser destruction of organ NOC  |
| Lymphoedema (Primary/Secondary) Surgical Inpatient Treatment | IFR | 15.10.19 | n/a |
| Neurostimulation | IFR |  | A091 A092 A093 A094 A095 A098 A099 A331 A332 A333 A334 A338 A339 A483 A484 A485A486 A701 A702 A703 A704 A707 A708 A709 L725 W334 W335 Y901 |
| Mandibular Advancement Device - NEW | IFR | 19.5.20 | G47.3 Sleep apnoea  |
| Osteopathy & Chiropractic Therapy | IFR | 18.2.20 | n/a |
| Open MRI Guidance | Threshold | 24.11.20 |  |
| Patella Resurfacing  | Threshold | 28.7.20 | W581, W582 |
| Pectus Carinatum | IFR | No policy required. Funded by NHS E | T02.1T02.1 - Correction of pectus deformity of chest wallIncludes: Correction of pectus carinatumCorrection of pectus excavatum |
| Pectus Excavatum | IFR | No policy required. Funded by NHS E | T02.2T02.2 - Insertion of silicone implant for correction of pectus excavatum  |
| Pinnaplasty (Prominent Ears) | Threshold | 19.02.19 | D03.3D03.3 - PinnaplastyIncludes: Correction of prominent ear |
| Plantar Fasciitis  | Threshold | 18.2.20 | n/a |
| Plastic Operations on Umbilicus | IFR | 15.10.19 | T29.6 |
| Removal of Redundant Fat or Skin | IFR | 18.6.19 | n/a(Also see Cosmetic Excision of Skin of Head or Neck & Liposuction) |
| Removal of Redundant Skin of EyelidsListed as:-Eyelid - removal of redundant skin | Threshold | 20.8.19 | C13.1, C13.2, C13.3, C13.4, C13.8, C13.9 C13.1 - Blepharoplasty of both eyelidsC13.2 - Blepharoplasty of upper eyelidC13.3 - Blepharoplasty of lower eyelidC13.4 - Blepharoplasty NECC13.8 - Other specified excision of redundant skin of eyelidC13.9 - Unspecified excision of redundant skin of eyelidC12.2C12.3C12.4C12.5C12.6C12.8 |
| Repair of EarlobesListed as:-Elective Surgical Repair of Earlobes | IFR | 18.2.20 | D03.1 D03.2 D03.8 D03.9 D06.1 D06.2 D06.4 D06.5 D06.8 D06.9 |
| Reversal of Sterilisation (male & female)See also Sterilisation by vasectomy & reversal for males | IFR | 18.2.20 | Q29.1, Q29.2, Q29.8, Q29.9, Q37.1, Q37.8, Q37.9, N18.1Q29.1 - Reanastomosis of fallopian tube NECQ29.2 - Open removal of clip from fallopian tube NEC Includes: Open removal of ring from fallopian tube NECQ29.8 - Other specified Open Reversal of female sterilisationQ29.9 - Unspecified Open reversal of female SterilisationQ37.1 - Endoscopic removal of clip from fallopian tubeQ37.8 - Other specified Endoscopic Reversal of female sterilisationQ37.9 - Unspecified Endoscopic Reversal of female sterilisation |
| Residential Pain Management  | IFR | 19.5.20 | n/a |
| Rhinophyma | IFR | 17.11.19 | ICD L71.1 |
| Rhinoplasty | Threshold | 18.6.19 | E02.3, E02.4, E02.5, E02.6, E02.7, E02.8, E07.3E02.3 - Septorhinoplasty using implantE02.4 - Septorhinoplasty using graftE02.5 - Reduction rhinoplastyE02.6 - Rhinoplasty NECE02.7 - Alar reconstruction with cartilage graftE02.8 - Other Specified Plastic Operations on noseE07.3 - Septorhinoplasty NEC |
| Sacro-iliac joint injections | Threshold | 18.2.20 | Z841 |
| Scars and Keloids | IFR | 11.3.21 | S60.4 - Refashioning of scar NEC S53.2 - Injection of therapeutic substance into skin (injection of scar tissue with local anaesthetic) – this is not exclusively for scar coding so could be used for other scenariosY06.4 – Excision of scar tissue NOC |
| Sensory Integration Therapy | IFR | 14.11.19 | n/a |
| Simple Snoring/UvuloplastyListed as:Simple Snoring Surgical Intervention | IFR | 10.01.19 | F32.6 |
| Shoulder Decompression – **NEW** Listed as**:-**Arthroscopic Shoulder Decompression for Subacromial Shoulder Pain | Threshold | 16.4.19 | 029.1 Sub acromial decompression W84.4 Endoscopic decompression of joint + Shoulder T791 Plastic repair of rotator cuff of shoulder NECW572 Primary excision arthroplasty of joint NECY713 Revisional operations NOCY767 Arthroscopic approach to jointZ941 Bilateral operationZ942 Right sided operationZ943 Left sided operationZ944 Unilateral operation |
| Spinal Fusion | Threshold | 18.6.19 | V37, V38, V39, V66V37.1 – Posterior fusion of atlantoaxial joint NECV37.2 – Posterior fusion of joint of cervical spine NECV37.3 – Transoral fusion of atlantoaxial jointV37.4 – Fusion of atlanto-occipital jointV37.5 – Posterior fusion of atlantoaxial joint using transarticular screwV37.6 – Posterior fusion of atlantoaxial joint using pedicle screwV37.7 – Fusion of occipitocervical junction NECV37.8 – Other specified primary fusion of joint of cervical spineV37.9 – Unspecified primary fusion of joint of cervical spineV38.1 – Primary fusion of joint of thoracic spineV38.2 – Primary posterior interlaminar fusion of joint of lumbar spineV38.3 – Primary posterior fusion of joint of lumbar spine NECV38.4 – Primary intertransverse fusion of joint of lumbar spine NECV38.5 – Primary posterior interbody fusion of joint of lumbar spineV38.6 – Primary transforaminal interbody fusion of joint of lumbar spineV38.8 – Other specified primary fusion of other joint of spineV38.9 – Unspecified primary fusion of other joint of spineV39.1 – Revisional fusion of joint of cervical spine NECV39.2 – Revisional fusion of joint of thoracic spineV39.3 – Revisional posterior interlaminar fusion of joint of lumbar spineV39.4 – Revisional posterior fusion of joint of lumbar spine NECV39.5 – Revisional intertransverse fusion of joint of lumbar spine NECV39.6 – Revisional posterior interbody fusion of joint of lumbar spineV39.7 – Revisional transforaminal interbody fusion of joint of lumbar spineV39.8 – Other specified revisional fusion of joint of spineV39.9 – Unspecified revisional fusion of joint of spineV66.1 – Revisional fusion of occipitocervical junctionV66.2 – Revisional posterior fusion of atlantoaxial joint using transarticular screwV66.3 – Revisional posterior fusion of atlantoaxial joint using pedicle screwV66.4 – Revisional posterior fusion of atlantoaxial joint NECV66.8 – Other specified other revisional fusion of joint of spineV66.9 – Unspecified other revisional fusion of joint of spine |
| Surgical Discectomy (for lumbar disc prolapse) | Threshold | 18.6.19 | V33, V34V33.1 - Primary laminectomy excision of lumbar intervertebral discV33.2 - Primary fenestration excision of lumbar intervertebral discV33.3 - Primary anterior excision of lumbar intervertebral disc and interbody fusion of joint of lumbar spineV33.4 - Primary anterior excision of lumbar intervertebral disc NECV33.5 - Primary anterior excision of lumbar intervertebral disc and posterior graft fusion of joint of lumbar spineV33.6 - Primary anterior excision of lumbar intervertebral disc and posterior instrumentation of lumbar spineV33.7 - Primary microdiscectomy of lumbar intervertebral discV33.8 - Other specified  Includes:  Primary posterior excision of lumbar intervertebral discV33.9 - UnspecifiedV34.1 - Revisional laminectomy excision of lumbar intervertebral discV34.2 - Revisional fenestration excision of lumbar intervertebral discV34.3 - Revisional anterior excision of lumbar intervertebral disc and interbody fusion of joint of lumbar spineV34.4 - Revisional anterior excision of lumbar intervertebral disc NECV34.5 - Revisional anterior excision of lumbar intervertebral disc and posterior graft fusion of joint of lumbar spineV34.6 - Revisional anterior excision of lumbar intervertebral disc and posterior instrumentation of lumbar spineV34.7 - Revisional microdiscectomy of lumbar intervertebral discV34.8 - Other specifiedIncludes:  Revisional posterior excision of lumbar intervertebral discV34.9 Unspecified |
| Suspected Facet Joint Pain/Radio Frequency Denervation – listed as : Radiofrequency denervation of facet joints | Threshold | 18.2.20 | \*Radiofrequency denervation of facet joints also within this policy – V48.1, V48.3, V48.5, V48.7 |
| Thigh/Arm Contouring | IFR | 18.6.19 | S03.2, S03.3 S03.2 – Thigh liftS03.3 – Excision of redundant skin or fat of arm |
| Toric-Intra-ocular Lenses for Corneal Astigmatism  | IFR | 16.4.19 | See Cataract procedure codes  |
| Tonsillectomies - listed as: Tonsillectomy -CCT with tonsillolithsTonsillectomy recurrent tonisillitisTonsillectomy - Sleep Apnoea ( under 16) | Threshold | 28.7.20 | F34.1, F34.2, F34.3, F34.4, F34.5, F34.6, F34.7, F34.8, F34.9F34.1 – Bilateral dissection tonsillectomyF34.2 – Bilateral guillotine tonsillectomyF34.3 – Bilateral laser tonsillectomyF34.4 – Bilateral excision of tonsil NECF34.5 – Excision of remnant of tonsilF34.6 – Excision of lingual tonsilF34.7 – Bilateral coblation tonsillectomyF34.8 – Other specified excision of tonsilF34.9 – Unspecified excision of tonsil |
| Transcranial Magnetic Stimulation | IFR | 17.11.19 | A09.8A09.9 |
| Trigger Finger (surgical management of) | Threshold | 19.02.19 | T72.3, Z56T72.3 - Release of constriction of sheath of tendonZ56.1 - Flexor pollicis longusZ56.2 - Thenar muscleZ56.3 - Flexor digitorum superficialisZ56.4 - Flexor digitorum profundusZ56.5 - Hypothenar muscleZ56.6 - Interosseous muscle of hand (This Includes: umbrical muscle of hand)Z56.7 - Extensor muscle of handZ56.8 - Specified muscle of hand NECZ56.9 - Muscle of hand NEC T692 Revision of tenolysisT701 Subcutaneous tenotomyT702 Tenotomy NECZ894 Hand NECZ895 Thumb NECZ897 Multiple digits of hand NEC |
| Ultrasound Guided Shoulder Injections  | Threshold | Under review May 2021 |  |
| Varicose Veins in the Legs (surgical management of) | Threshold | 11.3.21 | L84.1, L84.2, L84.3, L84.4, L84.5, L84.6, L84.8, L84.9, L85.1, L85.2, L85.3, L85.8, L85.9, L86.1, L86.2, L86.8, L86.9, L87.1, L87.2, L87.3, L87.4, L87.5, L87.6, L87.7, L87.8, L87.9, L88.1, L88.2, L88.3, L88.8, L88.9L84.1 - Combined operations on primary long saphenous veinL84.2 - Combined operations on primary short saphenous veinL84.3 - Combined operations on primary long and short saphenous veinL84.4 - Combined operations on recurrent long saphenous veinL84.5 - Combined operations on recurrent short saphenous veinL84.6 - Combined operations on recurrent long and short saphenous veinL84.8 - Other specified combined operations varicose vein of legL84.9 - Unspecified combined operations on varicose vein of legL85.1 - Ligation of long saphenous veinL85.2 - Ligation of short saphenous veinL85.3 - Ligation of recurrent varicose vein of legL85.8 - Other specified Ligation of Varicose vein of legL85.9 - Unspecified Ligation of Varicose vein of legL86.1 - Injection of sclerosing substance into varicose vein of leg NECL86.2 - Ultrasound guided foam sclerotherapy for varicose vein of legL86.8 - Other specified injection into varicose vein of legL86.9 - Unspecified injection into varicose vein of legL87.1 - Stripping of long saphenous veinL87.2 - Stripping of short saphenous veinL87.3 - Stripping of varicose vein of leg NECL87.4 - Avulsion of varicose vein of legL87.5 - Local excision of varicose vein of legL87.6 - Incision of varicose vein of legL87.7 - Transilluminated powered phlebectomy of varicose vein of legL87.8 - Other specified other operations on varicose vein of legL87.9 - Unspecified other operations on varicose vein of legL88.1 - Percutaneous transluminal laser ablation of long saphenous veinL88.2 - Radiofrequency ablation of varicose vein of legL88.3 - Percutaneous transluminal laser ablation of varicose vein of leg NECL88.8 - Other specified Transluminal operations on varicose vein of legL88.9 - Unspecified Transluminal operations on varicose vein of leg |
| Vasectomy and Male Sterilisation – listed as :Sterilisation by vasectomy & reversal | Threshold | 12.11.20 | N17.1 – Bilateral vasectomy includes Vasectomy NEC |
| Vertebroplasty for Osteoporosis | Threshold | 15.10.19 | V361, V362, V363, V368, V444, V551, V552, V553, V558, V559 |