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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, S02.9  S02.1 – Abdominoplasty  S02.2 – Abdominolipectomy  S02.8 – Other specified plastic excision of skin of abdominal wall  S02.9 – Unspecified plastic excision of skin of abdominal wall |
| Achilles Tendonopathy | Threshold | 29.2.20 | N/A |
| Acupuncture | IFR | 15.10.19 | A70.6  A70.6 – 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 nipples  B35.6 ICD N64.5, Q83.8, O92.0  B35.6 – eversion of nipple  Hypoplasia or Aplasia of breast(s)  B30.1, B30.2, B30.4, B31.2  B30.1 – Insertion of prosthesis for breast  B30.2 – Revision of prosthesis for breast  B30.4 – Renewal of prosthesis for breast  B31.2 – Augmentation mammoplasty  Breast reduction  B31.1  B31.1 – Reduction mammoplasty  Z49.1 - N62X  Ptosis/Mastopexy  B31.3 – Mastopexy  Breast augmentation  B31.2, B31.4, B30.1, B30.3, B30.8  B31.2 – Augmentation mammoplasty  B31.4 – Revision of mammoplasty  B30.1 – Insertion of prosthesis for breast  B30.8 – Other specified prosthesis of breast followed by Y03.2 Renewal of prosthesis in organ  Implant removal  B30.3 – Removal of prosthesis for breast  B311  B375  Y032  Implant replacement  B30.2, B30.4  B30.2 – Revision of prosthesis for breast  B30.4 – Renewal of prosthesis for breast |
| Assisted Conception- NEW | Threshold | Effective 03.06.19  Under 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 NEC  S06.9 – Unspecified other excision of lesion of skin  S09.1 - Laser destruction of lesion of skin of head or neck  S09.2 – Laser destruction of lesion of skin NEC  S09.3 – Photodestruction of lesion of skin of head or neck NEC  S09.4 – Infrared photocoagulation of lesion of skin of head or neck  S09.5 – Infrared photocoagulation of lesion of skin NEC  S09.8 – Other specified photodestruction of lesion of skin  S09.9 – Unspecified photodestruction of lesion of skin  S041 Excision of sweat gland bearing skin of axilla  S042 Excision of sweat gland bearing skin of groin  S043 Excision of sweat gland bearing skin NEC  S048 Other specified other excision of skin  S049 Unspecified other excision of skin  S051 Microscopically controlled excision of lesion of skin of head or neck using fresh tissue technique  S052 Microscopically controlled excision of lesion of skin using fresh tissue technique NEC  S053 Microscopically controlled excision of lesion of skin of head or neck using chemosurgical technique  S054 Microscopically controlled excision of lesion of skin using chemosurgical technique NEC  S055 Microscopically controlled excision of lesion of skin of head or neck NEC  S058 Other specified microscopically controlled excision of lesion of skin  S059 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 | S03.1  S03.1 - 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 | A65.1  A65.1 - Carpal tunnel release  A658 Other specified release of entrapment of peripheral nerve at wrist  A659 Unspecified release of entrapment of peripheral nerve at wrist |
| Cataract Surgery  Including 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, C77.9  C71.1 - Simple linear extraction of lens  C71.2 - Phacoemulsification of lens  C71.3 - Aspiration of lens  C71.8 - Other specified extracapsular extraction of lens  C71.9 - Unspecified extracapsular extraction of lens  C72.1 - Forceps extraction of lens  C72.2 - Suction extraction of lens  C72.3 - Cryoextraction of lens  C72.8 - Other specified intracapsular extraction of lens  C72.9 - Unspecified intracapsular extraction of lens  C73.1 - Membranectomy of lens  C73.2 - Capsulotomy of anterior lens capsule  C73.3 - Capsulotomy of posterior lens capsule  C73.4 - Capsulotomy of lens NEC  C73.8 - Other specified incision of capsule of lens  C73.9 - Unspecified incision of capsule of lens  C74.1 - Curettage of lens  C74.2 - Discission of cataract  C74.3 - Mechanical lensectomy  C74.8 - Other specified other extraction of lens  C74.9 - Unspecified other extraction of lens  C75.1 - Insertion of prosthetic replacement for lens NEC  C75.2 - Revision of prosthetic replacement for lens  C75.3 - Removal of prosthetic replacement for lens  C75.4 - Insertion of prosthetic replacement for lens using suture fixation  C75.8 - Other specified prosthesis of lens  C75.9 - Unspecified prosthesis of lens  C77.1 – Capsulectomy  C77.2 – Couching of lens  C77.3 – Biopsy of lesion of lens  C77.8 – Other specified other operation on lens  C77.9 – Unspecified other operation on lens |
| Chalazion (surgical management of) | Threshold | 28.7.20 | C12.1, C12.4, C19.1 ICD – H00.1  C12.1 – Excision of lesion of eyelid NEC  C12.4 – Curettage of lesion of eyelid  C19.1 – Drainage of lesion of eyelid  C122 Cauterisation of lesion of eyelid  C222 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, J21.9  J18.1 - Total cholecystectomy and excision of surrounding tissue  J18.2 - Total cholecystectomy and exploration of common bile duct  J18.3 - Total cholecystectomy NEC  J18.4 - Partial cholecystectomy and exploration of common bile duct  J18.5 - Partial cholecystectomy NEC  J18.8 - Other specified excision of gall bladder  J18.9 - Unspecified excision of gall bladder  J21.1 - Open removal of calculus from gall bladder  J21.8 - Other specified incision of gall bladder  J21.9 - Unspecified incision of gall bladder |
| Circumcision | Threshold | 20.8.19 | N30.3, N30.8, N30.9  N30.3 – Circumcision  N30.8 – 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 joint  Z843: Hip joint |
| Corneal Collagen Cross-Linking for Keratoconus | Threshold | 16.04.19 | C51.8, Y37.1  ICD - H18.6 or Q13.4 or Q90 and H19.8A  C51.8 – Other specified other operations on cornea  Y37.1 – 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, S09.9  S09.1 - Laser destruction of lesion of skin of head or neck  S09.2 – Laser destruction of lesion of skin NEC  S09.3 – Photodestruction of lesion of skin of head or neck NEC  S09.4 – Infrared photocoagulation of lesion of skin of head or neck  S09.5 – Infrared photocoagulation of lesion of skin NEC  S09.8 – Other specified photodestruction of lesion of skin  S09.9 – Unspecified photodestruction of lesion of skin  OR 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, S01.9  S01.1 - Facelift and tightening of platysma  S01.2 - Facelift NEC  S01.3 - Submental lipectomy  S01.4 - Browlift NEC  S01.5 - Direct browlift  S01.6 - Internal browlift  S01.8 - Other specified Plastic Excision of Skin of Head or Neck  S01.9 - 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, Q18.9  ICD – N92.0, N92.1  Q10.3 – Dilation of cervix uteri and curettage of uterus NEC  Q10.8 – Other specified curettage of uterus  Q18.8 – Other specified diagnostic endoscopic examination of uterus  Q18.9 – Unspecified diagnostic endoscopic examination of uterus |
| Dupuytren’s Contracture (surgical treatment of) | Threshold | Under Review – May CPDG | T52.1,T52.2,T54.1  T52.1 – Palmar fasciectomy  T52.2 – Revision of palmar fasciectomy  T54.1 – Division of palmar fascia  T525 Digital fasciectomy  T526 Revision of digital fasciectomy  T528 Other specified excision of other fascia  T529 Unspecified excision of other fascia  T548 Other specified division of fascia  T549 Unspecified division of fascia  T558 Other specified release of fascia  T559 Unspecified release of fascia  T561 Dermofasciectomy  T562 Revision of dermofasciectomy  T571 Freeing of adhesions of fascia  T574 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, C15.4  C15.1 - Correction of ectropion NEC  C15.4 - Correction of cicatricial ectropion  C15.2 |
| Eyelid Ptosis | Threshold | 16.04.19 | C18.1, C18.2, C18.3, C18.4, C18.5, C18.6, C18.8, C18.9  C18.1 – Correction of ptosis of eyelid using levator muscle technique  C18.2 – Correction of ptosis of eyelid using frontalis muscle technique  C18.3 – Correction of ptosis of eyelid using sling of fascia  C18.4 – Correction of ptosis of eyelid using superior rectus muscle technique  C18.5 – Tarsomullerectomy  C18.6 – Correction of ptosis of eyelid using aponeurosis technique  C18.8 – Other specified correction of ptosis of eyelid  C18.9 – Unspecified correction of ptosis of eyelid |
| Epiphora – Dacryocystorhinostomy (treatment of) | Threshold | 16.04.19 | C25.3, C25.4  C25.3 - Dacryocystorhinostomy and insertion of tube HFQ  C25.4 - Dacryocystorhinostomy NEC |
| Epiphora – Punctocanaliculoplasty (treatment of) | Threshold | 16.04.19 | C27.2, C29.2  C27.2 - 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, P23.9  P22.1 - Anterior and posterior colporrhaphy and amputation of cervix uteri  P22.2 - Anterior colporrhaphy and amputation of cervix uteri NEC  P22.3 - Posterior colporrhaphy and amputation of cervix uteri NEC  P22.8 - Other specified  P22.9 - Unspecified  Includes: Colporrhaphy and amputation of cervix uteri NEC  P23.1 - Anterior and posterior colporrhaphy NEC  P23.2 - Anterior colporrhaphy NEC  P23.3 - Posterior colporrhaphy NEC  P23.4 - Repair of enterocele NEC  P23.5 - Paravaginal repair  P23.6 - Anterior colporrhaphy with mesh reinforcement  P23.7 - Posterior colporrhaphy with mesh reinforcement  P23.8 - Other specified  P23.9 - Unspecified  Includes: Colporrhaphy NEC  P28.8  P28.9 |
| 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, T60.9  T59.1 – Excision of ganglion of wrist  T59.2 – Excision of ganglion of hand NEC  T59.3 – Excision of ganglion of knee  T59.4 – Excision of ganglion of foot  T59.8 – Other specified excision of ganglion  T59.9 – Unspecified excision of ganglion  T60.1 – Re-excision of ganglion of wrist  T60.2 – Re-excision of ganglion of hand NEC  T60.3 – Re-excision of ganglion of knee  T60.4 – Re-excision of ganglion of foot  T60.8 – Other specified re-excision of ganglion  T60.9 – Unspecified re-excision of ganglion |
| Gastro-electrical Stimulation (GES) for severe Gastroparesis | IFR | No policy required. Funded by NHS E | A70.1, Z27.2  A70.1 – Implantation of neurostimulator into peripheral nerve  Z27.2 – 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, H53.9  H51.1 – Haemorrhoidectomy  H51.2 – Partial internal sphincterotomy for haemorrhoid  H51.3 – Stapled haemorrhoidectomy  H51.8 – Other specified excision of haemorrhoid  H51.9 – Unspecified excision of haemorrhoid  H52.1 – Cryotherapy to haemorrhoid  H52.2 – Infrared photocoagulation of haemorrhoid  H52.3 – Injection of sclerosing substance in to haemorrhoid  H52.4 – Rubber band ligation of haemorrhoid  H52.8 – Other specified destruction of haemorrhoid  H52.9 – Unspecified destruction of haemorrhoid  H53.2 – Forced manual dilation of anus for haemorrhoid  H53.3 – Manual reduction of prolapsed haemorrhoid  H53.8 – Other specified other operation on haemorrhoid  H53.9 – 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 hair  S60.7 – 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, W59.9  ICD M20.1, Q66.6  W79.1 - Soft tissue correction of hallux valgus  Includes: Soft tissue correction of hallux valgus and excision of bunion  W15.1 - Osteotomy of neck of first metatarsal bone  W15.2 - Osteotomy of base of first metatarsal bone  W15.3 - Osteotomy of first metatarsal bone NEC  W15.4 - Osteotomy of head of metatarsal bone  W15.5 - Osteotomy of midfoot tarsal bone  W15.6 - Cuneiform osteotomy of proximal phalanx with resection of head of first metatarsal  W15.8 - Other specified division of bone of foot  W15.9 - Unspecified division of bone of foot  W16.1 - Multiple osteotomy and internal fixation HFQ  W59.1 - Fusion of first metatarsophalangeal joint and replacement of lesser metatarsophalangeal joint  W59.2 - Fusion of first metatarsophalangeal joint and excision of lesser metatarsophalangeal joint  W59.3 - Fusion of first metatarsophalangeal joint NEC  W59.4 - Fusion of interphalangeal joint of great toe  W59.5 - Fusion of interphalangeal joint of toe NEC  W59.6 - Revision of fusion of joint of toe  W59.8 - Other specified Fusion of Joint of Toe  W59.9 - 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, T98.9  T20.1 - Primary repair of inguinal hernia using insert of natural material  T20.2 - Primary repair of inguinal hernia using insert of prosthetic material  Includes: Primary repair of inguinal hernia using insert NEC  T20.3 - Primary repair of inguinal hernia using sutures  T20.4 - Primary repair of inguinal hernia and reduction of sliding hernia  T20.8 - Other specified primary repair of inguinal hernia  T20.9 - Unspecified primary repair of inguinal hernia  T21.1 - Repair of recurrent inguinal hernia using insert of natural material  T21.2 - Repair of recurrent inguinal hernia using insert of prosthetic material  Includes: Repair of recurrent inguinal hernia using insert NEC  T21.3 - Repair of recurrent inguinal hernia using sutures  T21.4 - Removal of prosthetic material from previous repair of inguinal hernia  T21.8 - Other specified Repair of recurrent inguinal hernia  T21.9 - Unspecified Repair of recurrent inguinal hernia  T24.1 - Repair of umbilical hernia using insert of natural material  T24.2 - Repair of umbilical hernia using insert of prosthetic material  Includes: Repair of umbilical hernia using insert NEC  T24.3 - Repair of umbilical hernia using sutures  T24.4 - Removal of prosthetic material from previous repair of umbilical hernia  T24.8 - Other specified Primary repair of umbilical hernia  T24.9 - Unspecified Primary repair of umbilical hernia  T97.1 – Repair of recurrent umbilical hernia using insert of natural material  T97.2 – Repair of recurrent umbilical hernia using insert of prosthetic material  T97.3 – Repair of recurrent umbilical hernia using sutures  T97.8 – 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 material  T25.2 - Primary repair of incisional hernia using insert of prosthetic material  Includes: Primary repair of incisional hernia using insert NEC  T25.3 - Primary repair of incisional hernia using sutures  T25.8 - Other specified Primary repair of incisional hernia  T25.9 - Unspecified Primary repair of incisional hernia  T26.1 - Repair of recurrent incisional hernia using insert of natural material  T26.2 - Repair of recurrent incisional hernia using insert of prosthetic material  Includes: Repair of recurrent incisional hernia using insert NEC  T26.3 - Repair of recurrent incisional hernia using sutures  T26.4 - Removal of prosthetic material from previous repair of incisional hernia  T26.8 - Other specified Repair of recurrent incisional hernia  T26.9 - Unspecified Repair of recurrent incisional hernia  T27.1 - Repair of ventral hernia using insert of natural material  T27.2 - Repair of ventral hernia using insert of prosthetic material  Includes: Rep air of ventral hernia using insert NEC  T27.3 - Repair of ventral hernia using sutures  T27.4 - Removal of prosthetic material from previous repair of ventral hernia  T27.8 - Other specified Repair of other hernia of abdominal wall  T27.9 - Unspecified Repair of other hernia of abdominal wall  T98.1 - Repair of recurrent ventral hernia using insert of natural material  T98.2 – Repair of recurrent ventral hernia using insert of prosthetic material  T98.3 – Repair of recurrent ventral hernia using sutures  T98.8 – 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, W95.1  W37.1 – Primary total prosthetic replacement of hip joint using cement  W38.1 – Primary total prosthetic replacement of hip joint not using cement  W39.1 – Primary total prosthetic replacement of hip joint NEC  W93.1 – Primary hybrid prosthetic replacement of hip joint using cemented acetabular component  W94.1 – Primary hybrid prosthetic replacement of hip joint using cemented femoral component  W95.1 – Primary hybrid prosthetic replacement of hip joint using cement NEC |
| Hip Resurfacing | IFR | 15.10.19 | W581 Primary resurfacing of joint  W582 Revision of resurfacing arthroplasty of joint in conjunction with Z756 Acetabulum/Z843 Hip joint  W581 with a diagnosis of Coxarthrosis |
| Homeopathy  Policy 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, Q08.9  Q07.4 - Total abdominal hysterectomy NEC  Includes: Hysterectomy NEC  Q07.5 - Subtotal abdominal hysterectomy  Q07.9 - Unspecified Abdominal excision of Uterus  Q08.9 - Unspecified  Includes: Vaginal hysterectomy NEC  Q071 Abdominal hysterocolpectomy and excision of periuterine tissue  Q073 Abdominal hysterocolpectomy NEC  Q076 Excision of accessory uterus  Q078 Other specified abdominal excision of uterus  Q081 Vaginal hysterocolpectomy and excision of periuterine tissue  Q083 Vaginal hysterocolpectomy NEC  Q088 Other specified vaginal excision of uterus  Q089 Unspecified vaginal excision of uterus  ICD - 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, Z84.6  W69.1 - Total synovectomy  W69.2 - Subtotal synovectomy  W69.3 - Partial synovectomy  W69.4 - Open biopsy of synovial membrane of joint  W69.8 - Other specified open operations on synovial membrane of joint  W69.9 - Unspecified open operations on synovial membrane of joint  W80.2 - Open debridement of joint NEC  W82.1 - Endoscopic total excision of semilunar cartilage  W82.2 - Endoscopic resection of semilunar cartilage NEC  W82.3 - Endoscopic repair of semilunar cartilage  W82.8 - Other specified therapeutic endoscopic operations on semilunar cartilage  W82.9 - Unspecified therapeutic endoscopic operations on semilunar cartilage  W84.1 - Endoscopic repair of intra-articular ligament  W84.2 - Endoscopic reattachment of intra-articular ligament  W84.3 - Endoscopic division of synovial plica  W84.4 - Endoscopic decompression of joint  W84.5 - Endoscopic drilling of epiphysis for repair of articular cartilage  W84.6 - Endoscopic excision of synovial plica  W84.7 - Endoscopic repair of superior labrum anterior to posterior tear  W84.8 - Other specified therapeutic endoscopic operations on other joint structure  W84.9 - Unspecified therapeutic endoscopic operations on other joint structure  W85.1 - Endoscopic removal of loose body from knee joint  W85.2 - Endoscopic irrigation of knee joint  W87.9 - Unspecified diagnostic endoscopic examination of knee joint  Y76.7 - Arthroscopic approach to joint  Z84.6 - 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 cement  W41.1 – Primary total prosthetic replacement of knee joint not using cement  W42.1 – Primary total prosthetic replacement of knee joint NEC  O18.1 - 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 tissue  P05.6 - Reduction labia minor  P05.7 - Reduction labia major  Z447  Z474 |
| 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, T29.3  ICD – D17.0 to D17.3  S06.5 - Excision of lesion of skin of head or neck NEC  S06.9 - Unspecified other excision of skin  B35.3 - Extirpation of lesion of nipple  C10.1 - Excision of lesion of eyebrow  C12.1 - Excision of lesion of eyelid NEC  D02.1 - Excision of lesion of external ear  E09.1 - Excision of lesion of external nose  F02.1 - Excision of lesion of lip  N01.2 - Excision of lesion of scrotum  N24.2 - Operations on skin of male perineum NEC  N27.1 - Excision of lesion of penis  P05.4 - Excision of lesion of vulva NEC  P11.1 - Excision of lesion of female perineum  T29.3 - Extirpation of lesion of umbilicus |
| Liposuction including Lipoedema | Threshold | 15.10.19 | S62.1, S62.2  S62.1 - Liposuction of subcutaneous tissue of head or neck  S62.2 - 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 M54.5  A51.4 - Endoscopic division of epidural adhesions  V31.4 - Primary percutaneous endoscopic excision of thoracic intervertebral disc  V33.8 - Other specified  Includes: Primary posterior excision of lumbar intervertebral disc  V36.1 - Prosthetic replacement of cervical intervertebral disc  V36.2 - Prosthetic replacement of thoracic intervertebral disc  V36.3 - Prosthetic replacement of lumbar intervertebral disc  V55.1 - One level of spine  V55.2 - Two levels of spine  V55.3 - Greater than two levels of spine  V55.8 - Other specified Level of Spine  V55.9 - Unspecified Level of Spine  V56.1 - Primary laser foraminoplasty of cervical spine  V56.2 - Primary laser foraminoplasty of thoracic spine  V56.3 - Primary laser foraminoplasty of lumbar spine  V56.4 - Primary laser foraminoplasty of spine NEC  V56.8 - Other specified Primary Foraminoplasty of spine  V56.9 - Unspecified Primary Foraminoplasty of spine  V57.1 - Revisional laser foraminoplasty of cervical spine  V57.2 - Revisional laser foraminoplasty of thoracic spine  V57.3 - Revisional laser foraminoplasty of lumbar spine  V57.4 - Revisional laser foraminoplasty of spine NEC  V57.8 - Other specified Revisional Foraminoplasty of spine  V57.9 - Unspecified Revisional Foraminoplasty of spine  V62.1 - Primary percutaneous intradiscal radiofrequency thermocoagulation to cervical intervertebral disc  V62.2 - Primary percutaneous intradiscal radiofrequency thermocoagulation to thoracic intervertebral disc  V62.3 - Primary percutaneous intradiscal radiofrequency thermocoagulation to lumbar intervertebral disc  V62.8 - Other specified primary percutaneous intradiscal radiofrequency thermocoagulation to intervertebral disc  V62.9 - Unspecified primary percutaneous intradiscal radiofrequency thermocoagulation to intervertebral disc  V63.1 - Revisional percutaneous intradiscal radiofrequency thermocoagulation to cervical intervertebral disc  V63.2 - Revisional percutaneous intradiscal radiofrequency thermocoagulation to thoracic intervertebral disc  V63.3 - Revisional percutaneous intradiscal radiofrequency thermocoagulation to lumbar intervertebral disc  V63.8 - Other specified revisional percutaneous intradiscal radiofrequency thermocoagulation to intervertebral disc  V63.9 - Unspecified revisional percutaneous intradiscal radiofrequency thermocoagulation to intervertebral disc  Y76.3 - Endoscopic approach to other body cavity  Y08.3 - 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 A485  A486 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 | T02.1  T02.1 - Correction of pectus deformity of chest wall  Includes: Correction of pectus carinatum  Correction of pectus excavatum |
| Pectus Excavatum | IFR | No policy required. Funded by NHS E | T02.2  T02.2 - Insertion of silicone implant for correction of pectus excavatum |
| Pinnaplasty (Prominent Ears) | Threshold | 19.02.19 | D03.3  D03.3 - Pinnaplasty  Includes: 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 Eyelids  Listed 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 eyelids  C13.2 - Blepharoplasty of upper eyelid  C13.3 - Blepharoplasty of lower eyelid  C13.4 - Blepharoplasty NEC  C13.8 - Other specified excision of redundant skin of eyelid  C13.9 - Unspecified excision of redundant skin of eyelid  C12.2  C12.3  C12.4  C12.5  C12.6  C12.8 |
| Repair of Earlobes  Listed 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, N18.1  Q29.1 - Reanastomosis of fallopian tube NEC  Q29.2 - Open removal of clip from fallopian tube NEC  Includes: Open removal of ring from fallopian tube NEC  Q29.8 - Other specified Open Reversal of female sterilisation  Q29.9 - Unspecified Open reversal of female Sterilisation  Q37.1 - Endoscopic removal of clip from fallopian tube  Q37.8 - Other specified Endoscopic Reversal of female sterilisation  Q37.9 - 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, E07.3  E02.3 - Septorhinoplasty using implant  E02.4 - Septorhinoplasty using graft  E02.5 - Reduction rhinoplasty  E02.6 - Rhinoplasty NEC  E02.7 - Alar reconstruction with cartilage graft  E02.8 - Other Specified Plastic Operations on nose  E07.3 - 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 scenarios  Y06.4 – Excision of scar tissue NOC |
| Sensory Integration Therapy | IFR | 14.11.19 | n/a |
| Simple Snoring/Uvuloplasty  Listed 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 NEC  W572 Primary excision arthroplasty of joint NEC  Y713 Revisional operations NOC  Y767 Arthroscopic approach to joint  Z941 Bilateral operation  Z942 Right sided operation  Z943 Left sided operation  Z944 Unilateral operation |
| Spinal Fusion | Threshold | 18.6.19 | V37, V38, V39, V66  V37.1 – Posterior fusion of atlantoaxial joint NEC  V37.2 – Posterior fusion of joint of cervical spine NEC  V37.3 – Transoral fusion of atlantoaxial joint  V37.4 – Fusion of atlanto-occipital joint  V37.5 – Posterior fusion of atlantoaxial joint using transarticular screw  V37.6 – Posterior fusion of atlantoaxial joint using pedicle screw  V37.7 – Fusion of occipitocervical junction NEC  V37.8 – Other specified primary fusion of joint of cervical spine  V37.9 – Unspecified primary fusion of joint of cervical spine  V38.1 – Primary fusion of joint of thoracic spine  V38.2 – Primary posterior interlaminar fusion of joint of lumbar spine  V38.3 – Primary posterior fusion of joint of lumbar spine NEC  V38.4 – Primary intertransverse fusion of joint of lumbar spine NEC  V38.5 – Primary posterior interbody fusion of joint of lumbar spine  V38.6 – Primary transforaminal interbody fusion of joint of lumbar spine  V38.8 – Other specified primary fusion of other joint of spine  V38.9 – Unspecified primary fusion of other joint of spine  V39.1 – Revisional fusion of joint of cervical spine NEC  V39.2 – Revisional fusion of joint of thoracic spine  V39.3 – Revisional posterior interlaminar fusion of joint of lumbar spine  V39.4 – Revisional posterior fusion of joint of lumbar spine NEC  V39.5 – Revisional intertransverse fusion of joint of lumbar spine NEC  V39.6 – Revisional posterior interbody fusion of joint of lumbar spine  V39.7 – Revisional transforaminal interbody fusion of joint of lumbar spine  V39.8 – Other specified revisional fusion of joint of spine  V39.9 – Unspecified revisional fusion of joint of spine  V66.1 – Revisional fusion of occipitocervical junction  V66.2 – Revisional posterior fusion of atlantoaxial joint using transarticular screw  V66.3 – Revisional posterior fusion of atlantoaxial joint using pedicle screw  V66.4 – Revisional posterior fusion of atlantoaxial joint NEC  V66.8 – Other specified other revisional fusion of joint of spine  V66.9 – Unspecified other revisional fusion of joint of spine |
| Surgical Discectomy (for lumbar disc prolapse) | Threshold | 18.6.19 | V33, V34  V33.1 - Primary laminectomy excision of lumbar intervertebral disc V33.2 - Primary fenestration excision of lumbar intervertebral disc V33.3 - Primary anterior excision of lumbar intervertebral disc and interbody fusion of joint of lumbar spine V33.4 - Primary anterior excision of lumbar intervertebral disc NEC V33.5 - Primary anterior excision of lumbar intervertebral disc and posterior graft fusion of joint of lumbar spine V33.6 - Primary anterior excision of lumbar intervertebral disc and posterior instrumentation of lumbar spine V33.7 - Primary microdiscectomy of lumbar intervertebral disc V33.8 - Other specified   Includes:  Primary posterior excision of lumbar intervertebral disc V33.9 - Unspecified  V34.1 - Revisional laminectomy excision of lumbar intervertebral disc V34.2 - Revisional fenestration excision of lumbar intervertebral disc V34.3 - Revisional anterior excision of lumbar intervertebral disc and interbody fusion of joint of lumbar spine V34.4 - Revisional anterior excision of lumbar intervertebral disc NEC V34.5 - Revisional anterior excision of lumbar intervertebral disc and posterior graft fusion of joint of lumbar spine V34.6 - Revisional anterior excision of lumbar intervertebral disc and posterior instrumentation of lumbar spine V34.7 - Revisional microdiscectomy of lumbar intervertebral disc V34.8 - Other specified Includes:  Revisional posterior excision of lumbar intervertebral disc V34.9 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 lift  S03.3 – 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 tonsilloliths  Tonsillectomy recurrent tonisillitis  Tonsillectomy - Sleep Apnoea ( under 16) | Threshold | 28.7.20 | F34.1, F34.2, F34.3, F34.4, F34.5, F34.6, F34.7, F34.8, F34.9  F34.1 – Bilateral dissection tonsillectomy  F34.2 – Bilateral guillotine tonsillectomy  F34.3 – Bilateral laser tonsillectomy  F34.4 – Bilateral excision of tonsil NEC  F34.5 – Excision of remnant of tonsil  F34.6 – Excision of lingual tonsil  F34.7 – Bilateral coblation tonsillectomy  F34.8 – Other specified excision of tonsil  F34.9 – Unspecified excision of tonsil |
| Transcranial Magnetic Stimulation | IFR | 17.11.19 | A09.8  A09.9 |
| Trigger Finger (surgical management of) | Threshold | 19.02.19 | T72.3, Z56  T72.3 - Release of constriction of sheath of tendon  Z56.1 - Flexor pollicis longus  Z56.2 - Thenar muscle  Z56.3 - Flexor digitorum superficialis  Z56.4 - Flexor digitorum profundus  Z56.5 - Hypothenar muscle  Z56.6 - Interosseous muscle of hand (This Includes: umbrical muscle of hand)  Z56.7 - Extensor muscle of hand  Z56.8 - Specified muscle of hand NEC  Z56.9 - Muscle of hand NEC  T692 Revision of tenolysis  T701 Subcutaneous tenotomy  T702 Tenotomy NEC  Z894 Hand NEC  Z895 Thumb NEC  Z897 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, L88.9  L84.1 - Combined operations on primary long saphenous vein  L84.2 - Combined operations on primary short saphenous vein  L84.3 - Combined operations on primary long and short saphenous vein  L84.4 - Combined operations on recurrent long saphenous vein  L84.5 - Combined operations on recurrent short saphenous vein  L84.6 - Combined operations on recurrent long and short saphenous vein  L84.8 - Other specified combined operations varicose vein of leg  L84.9 - Unspecified combined operations on varicose vein of leg  L85.1 - Ligation of long saphenous vein  L85.2 - Ligation of short saphenous vein  L85.3 - Ligation of recurrent varicose vein of leg  L85.8 - Other specified Ligation of Varicose vein of leg  L85.9 - Unspecified Ligation of Varicose vein of leg  L86.1 - Injection of sclerosing substance into varicose vein of leg NEC  L86.2 - Ultrasound guided foam sclerotherapy for varicose vein of leg  L86.8 - Other specified injection into varicose vein of leg  L86.9 - Unspecified injection into varicose vein of leg  L87.1 - Stripping of long saphenous vein  L87.2 - Stripping of short saphenous vein  L87.3 - Stripping of varicose vein of leg NEC  L87.4 - Avulsion of varicose vein of leg  L87.5 - Local excision of varicose vein of leg  L87.6 - Incision of varicose vein of leg  L87.7 - Transilluminated powered phlebectomy of varicose vein of leg  L87.8 - Other specified other operations on varicose vein of leg  L87.9 - Unspecified other operations on varicose vein of leg  L88.1 - Percutaneous transluminal laser ablation of long saphenous vein  L88.2 - Radiofrequency ablation of varicose vein of leg  L88.3 - Percutaneous transluminal laser ablation of varicose vein of leg NEC  L88.8 - Other specified Transluminal operations on varicose vein of leg  L88.9 - 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 |