

Notification of changes to AXA PPP Schedule of Procedures & Fees – March 2018

1. New Codes

Code	Narrative	Notes	Effective Date
XR930	BILATERAL INFERIOR PETROSAL SINUS SAMPLING		07/03/2018
Q2233	OPEN OOPHORECTOMY AND SALPINGECTOMY, +/- BIOPSY EG. OMENTUM, PERITONEUM, LYMPH NODE (AS SOLE PROCEDURE) – BILATERAL	See 4. Unbundling	12/03/2018
V0721	EMINECTOMY OF TEMPOROMANDIBULAR JOINT – UNILATERAL		13/03/2018
V0722	EMINECTOMY OF TEMPOROMANDIBULAR JOINT – BILATERIAL		13/03/2018

2. Narrative Changes

Code	Previous Narrative	New Narrative	Notes	Effective Date
B2986	RECONSTRUCTION OF BREAST USING DEEP INFERIOR EPIGASTRIC PERFORATOR FLAP (DIEP) (INCLUDING DELAYED RECONSTRUCTION) - UNILATERAL	RECONSTRUCTION OF BREAST USING DEEP INFERIOR EPIGASTRIC PERFORATOR FLAP (DIEP) (INCLUDING DELAYED RECONSTRUCTION) – UNILATERAL (SINGLE FLAP)		09/03/2018
B2996	RECONSTRUCTION OF BREAST USING DEEP INFERIOR EPIGASTRIC PERFORATOR FLAP (DIEP) (INCLUDING DELAYED RECONSTRUCTION) – BIILATERAL	RECONSTRUCTION OF BREAST USING DEEP INFERIOR EPIGASTRIC PERFORATOR FLAP (DIEP) (INCLUDING DELAYED RECONSTRUCTION) – BIILATERAL (SINGLE FLAP PER BREAST)		09/03/2018
Q2230	OOPHORECTOMY AND SALPINGECTOMY, +/- BIOPSY EG. OMENTUM, PERITONEUM, LYMPH	LAPAROSCOPIC OOPHORECTOMY AND SALPINGECTOMY, +/- BIOPSY EG. OMENTUM,		09/03/2018

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	NODE (AS SOLE PROCEDURE) - BILATERAL	PERITONEUM, LYMPH NODE (AS SOLE PROCEDURE) - BILATERAL		
Q2231	OOPHORECTOMY AND SALPINGECTOMY, +/- BIOPSY EG. OMENTUM, PERITONEUM, LYMPH NODE (AS SOLE PROCEDURE) - UNILATERAL	LAPAROSCOPIC OOPHORECTOMY AND SALPINGECTOMY, +/- BIOPSY EG. OMENTUM, PERITONEUM, LYMPH NODE (AS SOLE PROCEDURE) - UNILATERAL		09/03/2018
H5510	LAYING OPEN OF LOW ANAL FISTULA (FISTULOTOMY) +/- INSERTION OF STITCH (INCLUDING SIGMOIDOSCOPY)	LAYING OPEN OF LOW ANAL FISTULA (FISTULOTOMY) (INCLUDING SIGMOIDOSCOPY)		09/03/2018
H5520	LAYING OPEN OF HIGH ANAL FISTULA (FISTULOTOMY) +/- INSERTION OF STITCH (INCLUDING SIGMOIDOSCOPY)	LAYING OPEN OF HIGH ANAL FISTULA (FISTULOTOMY) (INCLUDING SIGMOIDOSCOPY)		09/03/2018
T6520	TENDON SHEATH INJECTION	TENDON SHEATH INJECTION OF THERAPEUTIC SUBSTANCE INCLUDING VISCOSUPPLEMENT +/- IMAGE GUIDANCE		09/03/2018
X3520	IV SEDATION ADMINISTERED BY ANAESTHETIST	IV SEDATION ADMINISTERED BY ANAESTHETIST (AS SOLE PROCEDURE)		09/03/2018
J0200	PARTIAL HEPATECTOMY	PARTIAL HEPATECTOMY (LEFT HEPATECTOMY OR RESECTION OF UP TO THREE SEGMENTS)		09/03/2018
J0210	HEMIHEPATECTOMY	HEMIHEPATECTOMY (RESECTION OF FOUR OR MORE SEGMENTS)		09/03/2018
J0200	PARTIAL HEPATECTOMY (LEFT HEPATECTOMY OR RESECTION OF UP TO THREE SEGMENTS)	PARTIAL HEPATECTOMY (LEFT HEPATECTOMY OR RESECTION OF UP TO THREE SEGMENTS) +/- CHOLECYSTECTOMY		19/03/2018
J0210	HEMIHEPATECTOMY (RESECTION OF FOUR OR MORE SEGMENTS)	HEMIHEPATECTOMY (RESECTION OF FOUR OR MORE SEGMENTS) +/- CHOLECYSTECTOMY		19/03/2018

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3. Deleted Codes

Code	Narrative	Notes	Effective Date
25120	DORSAL ROOT GANGLION BLOCK (LOCAL ANAESTHETIC OR NEUROLYTIC) (AS SOLE PROCEDURE)	Alternatives: A5291 ; A5292 ; A5293 ; A5294	12/03/2018
A5780	RHIZOLYSIS	Alternatives: A5720 ; A5730	19/03/2018
W9031	THREE OR MORE INJECTIONS, +/- ASPIRATION, INTO JOINT(S), CYST, BURSA OR SOFT TISSUE, WITH IMAGE GUIDANCE	Alternatives: W9030 ; W9035 ; W9033	19/03/2018

4. Unbundling

Code	Narrative	Unbundled	Effective Date
25120	DORSAL ROOT GANGLION BLOCK (LOCAL ANAESTHETIC OR NEUROLYTIC) (AS SOLE PROCEDURE)	A5772	01/03/2018
Q1800	HYSTEROSCOPY (INCLUDING BIOPSY, DILATATION, CURETTAGE AND RESECTION POLYP(S) +/- MIRENA COIL INSERTION)	(Removed) Q0230	08/03/2018
K4610	MINIMALLY INVASIVE DIRECT CORONARY ARTERY BYPASS (MIDCAB) INCLUDING HARVESTING GRAFT	K4100	08/03/2018
M1120	DIAGNOSTIC URETERORENOSCOPY (+/- CYSTOSCOPY)	M1130 ; M4514	08/03/2018
A5220	EPIDURAL INJECTION (THORACIC)	A5292	08/03/2018
A5291	TRANSFORAMINAL EPIDURAL (CERVICAL)	A5200	08/03/2018
A5200	EPIDURAL INJECTION (CERVICAL)	A5291	08/03/2018
A5752	MEDIAL BRANCH BLOCK (UNDER X-RAY CONTROL) - 1 TO 2 LEVELS	25120	08/03/2018
A5762	MEDIAL BRANCH BLOCK (UNDER X-RAY CONTROL) - 3 TO 4 LEVELS	25120	08/03/2018
A5772	MEDIAL BRANCH BLOCK (UNDER X-RAY CONTROL) - 5 TO 6 LEVELS	25120	08/03/2018
C6010	SURGICAL TRABECULECTOMY OR OTHER PENETRATING GLAUCOMA PROCEDURES (INCLUDING TOPICAL OR LOCAL ANAESTHETIC)	C6051 ; C6052	08/03/2018
C6120	TRABECULAR STENT BYPASS MICROSURGERY FOR OPEN-ANGLE GLAUCOMA (INCLUDING TOPICAL OR LOCAL ANAESTHETIC)	C6051 ; C6052	08/03/2018

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C6130	GONIOTOMY (SURGICAL TREATMENT OF GLAUCOMA) (INCLUDING TOPICAL OR LOCAL ANAESTHETIC)	C6051 ; C6052	08/03/2018
C6150	REVISION OF PREVIOUS GLAUCOMA SURGERY (INCLUDING TOPICAL OR LOCAL ANAESTHETIC)	C6051 ; C6052	08/03/2018
C6160	COMPLEX GLAUCOMA SURGERY (INCLUDING ANTI-METABOLITES/INSERTION OF SETON DEVICES) (INCLUDING TOPICAL OR LOCAL ANAESTHETIC)	C6051 ; C6052	08/03/2018
C6720	LASER TREATMENT FOR GLAUCOMA E.G. CYCLODIODE	C6051 ; C6052	09/03/2018
C6052	AQUEOUS SHUNT TUBE SURGERY FOR GLAUCOMA (INCLUDING TOPICAL OR LOCAL ANAESTHETIC) INCLUDING DONOR PATCH - BILATERAL	C6720	09/03/2018
D0342	BONEY MEATOPLASTY	D1710	09/03/2018
D1710	STAPEDECTOMY (AS SOLE PROCEDURE)	D0342	09/03/2018
D1720	REVISION STAPEDECTOMY (AS SOLE PROCEDURE)	D0342	09/03/2018
H5240	BANDING OF HAEMORRHOIDS	H5400 ; H6260	09/03/2018
H5400	ANORECTAL STRETCH	H5240	09/03/2018
H6260	PROCTOSCOPY (+/- BIOPSY)	H5240 ; H5250	09/03/2018
H5250	CIRCULAR STAPLING HAEMORRHOIDECTOMY	H6260	09/03/2018
Q2233	OPEN OOPHORECTOMY AND SALPINGECTOMY, +/- BIOPSY EG. OMENTUM, PERITONEUM, LYMPH NODE (AS SOLE PROCEDURE) – BILATERAL	H0210 ; H1700 ; Q0740 ; Q0750 ; Q0800 ; Q0830 ; Q3800 ; Q3900 ; Q4400 ; Q2231 ; Q0880	12/03/2018
Q0880	HYSTERECTOMY WITH EXCISION / BIOPSY AND/OR REMOVAL OF OMENTUM AND UTERINE ADNEXA FOR OVARIAN MALIGNANCY +/- URETEROLYSIS	Q2233	12/03/2018
H1700	INTRA ABDOMINAL MANIPULATION OF COLON FOR INTUSSUSCEPTION (AS SOLE PROCEDURE)	Q2233	12/03/2018
Q0740	TOTAL ABDOMINAL HYSTERECTOMY (+/- OOPHORECTOMY) +/- URETEROLYSIS	Q2233	12/03/2018
Q0750	SUBTOTAL ABDOMINAL HYSTERECTOMY (+/-	Q2233	12/03/2018

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	OOPHORECTOMY) +/- URETEROLYSIS		
Q0800	VAGINAL HYSTERECTOMY WITHOUT LAPAROSCOPIC ASSISTANCE	Q2233	12/03/2018
Q0830	VAGINAL HYSTERECTOMY WITH LAPAROSCOPIC ASSISTANCE +/- URETEROLYSIS	Q2233	12/03/2018
Q3800	LAPAROSCOPY AND THERAPEUTIC PROCEDURES (INCLUDING LASER, DIATHERMY AND DESTRUCTION EG ENDOMETRIOSIS, ADHESIOLYSIS TUBAL&OVARIAN SURGERY +/- URETEROLYSIS	Q2233	12/03/2018
Q3900	LAPAROSCOPY (INCLUDING E.G. PUNCTURE OF OVARIAN CYSTS, +/- BIOPSY, MINOR ENDOMETRIOSIS, +/- URETEROLYSIS)	Q2233	12/03/2018
Q4400	OVARIAN CYSTECTOMY, +/- OMENTAL BIOPSY (AS SOLE PROCEDURE AND INCLUDING BILATERAL	Q2233	12/03/2018
Q2231	LAPAROSCOPIC OOPHORECTOMY AND SALPINGECTOMY, +/- BIOPSY EG. OMENTUM, PERITONEUM, LYMPH NODE (AS SOLE PROCEDURE) - UNILATERAL	Q2233	12/03/2018
A7352	IMAGE-GUIDED LOCAL ANAESTHETIC BLOCKADE OF NAMED MAJOR NERVE OR PLEXUS	W9030 ; W8194 ; W1590 ; W0860 ; W8603 ; W0460	13/03/2018
W9030	INJECTIONS(S) +/- ASPIRATION, INTO JOINT, CYST, BURSA OR SOFT TISSUE, WITH IMAGE GUIDANCE	A7352	13/03/2018
W8194	ARTHROSCOPIC SUB-ACROMIAL DECOMPRESSION AND EXCISION O DISTAL CLAVICLE (INCLUDING ARTHROSCOPIC PROCEDURES IN GLENOHUMERAL JOINT)	A7352	14/03/2018
W1590	CORRECTION OF RETRACTED/DISLOCATED METATARSO-PHALANGEAL JOINT (INCLUDING TENDON TRANSFER, DIVISION/REALIGNMENT OF BONE AND INTERNAL FIXATION)	A7352	14/03/2018
W0860	METATARSO-PHALANGEAL CHEILECTOMY - UNILATERAL, AS SOLE PROCEDURE	A7352	14/03/2018

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W8603	THERAPEUTIC ARTHROSCOPY OF SHOULDER (AS SOLE PROCEDURE)	A7352	14/03/2018
W0460	COMPLEX PROCEDURE TO MID FOOT OR HIND FOOT WITHOUT AUTOGENOUS BONE GRAFT (OSTEOTOMY/FUSION +/- TENDON TRANSFERS)	A7352	14/03/2018
XR575	PERCUTANEOUS INSERTION OF METALLIC BILIARY ENDOPROSTHESIS	J3900	19/03/2018
J3900	THERAPEUTIC ERCP WITH INSERTION OF BILIARY OR PANCREATIC STENT(S), SPHINCTEROTOMY OR STONE EXTRACTION	XR575	19/03/2018
M1910	CONSTRUCTION OF ILEAL CONDUIT (INCLUDING URETERIC IMPLANTATION)	M2920	19/03/2018
M2920	ENDOSCOPIC INSERTION/REMOVAL OF PROSTHESIS INTO URETER (INCLUDING BILATERAL AND CYSTOSCOPY, +/- PYELOGRAPHY)	M1910	19/03/2018
T2510	LAPAROSCOPIC REPAIR OF PARASTOMAL HERNIA REQUIRING MESH	T2500 ; T2600 ; T2720	19/03/2018
T2500	OPEN REPAIR OF INCISIONAL OR VENTRAL HERNIA NOT REQUIRING MESH	T2510	19/03/2018
T2600	REPAIR OF RECURRENT INCISIONAL OR VENTRAL HERNIA NOT REQUIRING MESH	T2510	19/03/2018
T2720	LAPAROSCOPIC REPAIR OF INCISIONAL OR VENTRAL HERNIA REQUIRING MESH	T2510	19/03/2018
J5610	PANCREATICODUODENECTOMY AND EXCISION OF SURROUNDING TISSUE (WHIPPLE'S PROCEDURE)	J1820 ; J1800	19/03/2018
J1800	CHOLECYSTECTOMY (INCLUDING MINI-CHOLECYSTECTOMY)	J5610 ; J0200 ; J0210	19/03/2018
J1820	CHOLECYSTECTOMY WITH EXPLORATION OF COMMON BILE DUCT	J5610 ; J0200 ; J0210	19/03/2018
Q3800	LAPAROSCOPY AND THERAPEUTIC PROCEDURES (INCLUDING LASER, DIATHERMY AND DESTRUCTION EG ENDOMETRIOSIS, ADHESIOLYSIS TUBAL&OVARIAN SURGERY +/- URETEROLYSIS	Q0750	19/03/2018
J0200	PARTIAL HEPATECTOMY (LEFT	J1800 ; J1820 ;	19/03/2018

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	HEPATECTOMY OR RESECTION OF UP TO THREE SEGMENTS)	J1830 ; J1880	
J1830	LAPAROSCOPIC CHOLECYSTECTOMY	J0200 ; J0210	19/03/2018
J1880	LAPAROSCOPIC CHOLECYSTECTOMY WITH PERI-OPERATIVE CHOLANGIOGRAM	J0200 ; J0210	19/03/2018
J0210	HEMIHEPATECTOMY (RESECTION OF FOUR OR MORE SEGMENTS)	J1800 ; J1820 ; J1830 ; J1880	19/03/2018
E1432	FESS UNCINECTOMY, ETHMOIDECTOMY, ANTROSTOMY OR ANTRAL PUNCTURE INC POLYPECTOMY AND ATTENTION TO TURBINATES ETC	E1360 ; E1370 ; E1380	19/03/2018
E1360	ENDOSCOPIC BALLOON DILATION FRONTAL SINUPLASTY AND BILATERAL	E1432	19/03/2018
E1370	ENDOSCOPIC BALLOON DILATION MAXILLARY SINUPLASTY AND BILATERAL	E1432	19/03/2018
E1380	ENDOSCOPIC BALLOON DILATION SPHENOID SINUPLASTY AND BILATERAL	E1432	19/03/2018

5. Fee Changes

Code	Narrative	Notes	Effective Date
W9030	INJECTIONS(S) +/- ASPIRATION, INTO JOINT, CYST, BURSA OR SOFT TISSUE, WITH IMAGE GUIDANCE	Fee Reduced to £115.	01/07/2018
W9032	INJECTION OF VISCOSUPPLEMENT INTO JOINT WITH IMAGE GUIDANCE	Fee Reduced to £115.	01/07/2018
W9033	INJECTIONS OF VISCOSUPPLEMENT INTO JOINTS WITH IMAGE GUIDANCE - BILATERAL	Fee Reduced to £135.	01/07/2018
W9035	INJECTION(S) +/- ASPIRATION, INTO TWO OR MORE JOINTS, CYSTS, BURSAE OR SOFT TISSUE, WITH IMAGE GUIDANCE	Fee Reduced to £135.	01/07/2018
W9040	INJECTION(S) +/- ASPIRATION, INTO JOINT, CYST, BURSA OR SOFT TISSUE	Fee Reduced to £50.	01/07/2018
W9042	INJECTION OF VISCOSUPPLEMENT INTO JOINT	Fee Reduced to £50.	01/07/2018
W9045	INJECTION(S) +/- ASPIRATION, INTO TWO OR MORE JOINTS, CYSTS, BURSAE OR SOFT TISSUE	Fee Reduced to £115.	01/07/2018

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6. Other

Code	Narrative	Notes	Effective Date

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