



Southern Cross
Health Society

List of Surgical Procedures

Effective from 9 September 2010

List of Surgical Procedures

Applies to Extensive Cover (*HospitalCare*, *Hospital & SpecialistCare* and *SureCare*), *UltraCare* (*UltraCare* Base, *UltraCare* Option 100, and *UltraCare* Option 400), *SureCare* Concessionary, *SuperCare* and *Wellbeing* plans.

This **List of Surgical Procedures** forms part of your Southern Cross Health Society policy. It should be read in conjunction with your policy document.

The **List of Surgical Procedures** sets out the surgical procedures covered by your ExtensiveCover, UltraCare, SureCare Concessionary, SuperCare or Wellbeing plan, under the Surgical Treatment section of the Coverage Table.

The **List of Surgical Procedures** is made up of fourteen sections: general surgery, otolaryngology (ear nose and throat), urology, gynaecology, ophthalmology, orthopaedic surgery, peripheral vascular surgery, oral and maxillofacial surgery, interventional radiology, cardiac surgery, neurosurgery, plastic surgery, prostheses and tests.

Your plan provides cover for the surgical procedures contained in the **List of Surgical Procedures**, subject to the policy limits outlined in the Coverage Table of your policy document, the prostheses policy limits set out in Section 13 and subject to the usual policy exclusions (including pre-existing conditions and other terms and conditions set out in the policy). Refer to the chart under 'How does my cover work under my policy' in your policy document for how your refund for eligible healthcare services will be calculated. If you are on a SureCare plan, excesses will apply.

If you are intending to have surgery, please call us so that we can guide you through the **List of Surgical Procedures** and provide prior approval for your claim.

Procedures not listed

If a surgical procedure is not included in the **List of Surgical Procedures** (or specifically included in the coverage table) it will not be covered unless otherwise advised by, and at the sole discretion of Southern Cross. In these circumstances there is no guarantee of a refund. If Southern Cross decides to grant an ex-gratia refund, it is likely to be significantly less than the actual cost.

Median total cost for a procedure

To give you an idea of the total cost that you may be charged, we have included in the **List of Surgical Procedures** the median total fee that Southern Cross members were charged by providers between 1 July 2008 and 30 June 2009 for each procedure.

This median total charge for each procedure includes the following components (where applicable):

- Surgeon's fee.
- Anaesthetist's fee.
- Hospital fees, including accommodation and operating theatre fees, X-rays and sundries.
- Any surgically implanted prosthesis (prostheses costs vary considerably depending on need and clinical preference).
- In-hospital post-operative physiotherapy.

In some cases we don't have enough information from the claims made by our members in 2008/09 to provide a fair indication of the likely costs. In these cases we have left that field in the table blank.

The median total cost figures provided in the **List of Surgical Procedures** are not indicative of your likely refund for each component of the surgery. Your policy limits are outlined in the Coverage Table in your policy guide.

Southern Cross reserves the right to change or update this **List of Surgical Procedures** from time to time.

SC code	Description of Surgical Procedure	Median total price (\$)
	SECTION 1: GENERAL SURGERY	
	Breast	
111	Breast Biopsy With Frozen Section	
129	Open Breast Biopsy - Bilateral	
130	Open Breast Biopsy	3,530
132	Breast Biopsy - Hook Wire	4,902
134	Core biopsy of breast	346
135	Excision Accessary Breast Tissue	
140	Breast - Simple Mastectomy, Unilateral	
150	Breast - Simple Mastectomy, Bilateral	
160	Breast, Male - Unilateral Mastectomy	
170	Breast, Male - Bilateral Mastectomy	
175	Sentinel Node Biopsy	
176	Partial Mastectomy With Sentinel Node Biopsy	
177	Partial Mastectomy	5,313
178	Correction Of Nipple Inversion - Unilateral	
179	Correction Of Nipple Inversion - Bilateral	
180	Wide Local Excision With Axillary Dissection, Breast - Unilateral	
182	Extended Simple Mastectomy With Axillary Dissection - Unilateral	9,373
185	Wide Local Excision With Axillary Dissection, Breasts - Bilateral	
186	Extended Simple Mastectomy With Axillary Dissection - Bilateral	
187	Breast Reconstruction - Transfer Tram Microsurgical (must be completed within 2 years of initial reconstruction following eligible mastectomy)	
188	Breast Reconstruction - Transfer Tram Pedicled (must be completed within 2 years of initial reconstruction following eligible mastectomy)	
189	Breast Reconstruction - Delay Procedure (prelim Tram Flap procedure) (must be completed within 2 years of initial reconstruction following eligible mastectomy)	
192	Breast Reconstruction- Insertion of Tissue expander or implant - Unilateral (must be completed within 2 years of initial reconstruction following eligible mastectomy)	
193	Breast Reconstruction- Insertion of Tissue expander or implant - Bilateral (must be completed within 2 years of initial reconstruction following eligible mastectomy)	
194	Breast Reconstruction- Removal of tissue expander and replacement with implant, size and adjust - Unilateral (must be completed within 2 years of initial reconstruction following eligible mastectomy)	
195	Breast Reconstruction- Removal of tissue expander and replacement with implant, size and adjust – Bilateral (must be completed within 2 years of initial reconstruction following eligible mastectomy)	
200	Breast Reconstruction - Latissimus Dorsi Muscle Transposition, Autogenous or with expander or Implant - Unilateral (must be completed within 2 years of initial reconstruction following eligible mastectomy)	

SC code	Description of Surgical Procedure	Median total price (\$)
202	Breast Reconstruction- Removal of tissue expander and replacement with implant, + Nipple reconstruction - Unilateral (must be completed within 2 years of initial reconstruction following eligible mastectomy)	
203	Breast Reconstruction- Removal of tissue expander and replacement with implant, + Nipple reconstruction - Bilateral (must be completed within 2 years of initial reconstruction following eligible mastectomy)	
204	Nipple reconstruction post mastectomy (separate procedure) Unilateral (must be completed within 2 years of initial reconstruction following eligible mastectomy)	
206	Nipple Areolar Tattoo (must be completed within 2 years of initial reconstruction following eligible mastectomy)	
207	Nipple Areola Reconstruction with full thickness graft (must be completed within 2 years of initial reconstruction following eligible mastectomy)	
208	Breast Microdochotomy	
209	Nipple reconstruction post mastectomy (separate procedure) Bilateral (must be completed within 2 years of initial reconstruction following eligible mastectomy)	
310	Axillary Node Dissection	5,338
	Gastrointestinal	
31	Anal Sphincterotomy	
40	Simple Repair Of Anal Fistula	
50	Complicated Repair Of Anal Fistula	
60	Anal Dilatation	
90	Abdominal Paracentesis Or Pleural Tap	
440	Haemorrhoids - External	
445	Infrared Coagulation of Haemorrhoids	
451	Haemorrhoidectomy Including Sigmoidoscopy	4,753
460	Injection Of Haemorrhoids	146
461	Injection Of Haemorrhoids And Sigmoidoscopy	300
470	Banding Of Haemorrhoids	200
471	Excision Of Anal Skin Tag	
620	Pilonidal Abscess, Including Drainage	
631	Excision Of Pilonidal Sinus	4,310
650	Sigmoidoscopy Including Consultation	210
660	Sigmoidoscopy With Biopsy	940
661	Sigmoidoscopy And Anal Fistula	
940	Freeing Of Minor Abdominal Adhesions	
945	Laparoscopic Freeing Of Minor Abdominal Adhesions	
950	Freeing Of Major Abdominal Adhesions	
955	Laparoscopic Freeing Of Major Abdominal Adhesions	
969	Botulinum toxin type 4 injection for anal fissure (rooms only)	
971	Appendicectomy	

SC code	Description of Surgical Procedure	Median total price (\$)
974	Laparoscopic Appendectomy	
976	Anal Or Perineal Graciloplasty	
978	Sphincteroplasty	
979	Rectosigmoidectomy With Formation Of Stoma	
982	Right Hemicolectomy - With Formation Of Stoma	
983	Left Hemicolectomy - With Formation Of Stoma	
984	Laparoscopic Hemicolectomy - With Formation Of Stoma	
985	Left Hemicolectomy - With Anastomosis	
986	Right Hemicolectomy - With Anastomosis	
987	Laparoscopic Hemicolectomy - With Anastomosis	15,315
991	Sigmoidcolectomy With Anastomosis	
992	Sigmoidcolectomy With Formation of Stoma	
995	Colectomy - Total With Ileo-Rectal Anastomosis	
996	Laparoscopic Colectomy - Total With Ileo-Rectal Anastomosis	
1010	Colostomy - Formation	
1011	Colostomy - Closure	
1012	Revision Colostomy	
1013	Ileostomy Formation	
1014	Ileostomy Closure	
1015	Ileostomy Revision	
1020	Colotomy - For Polyp Or Wedge Resection Of Colon For Polyp	
1030	Cholecystectomy	
1040	Cholecystectomy With Operative Cholangiogram	
1042	Laparoscopic Cholecystectomy	7,137
1044	Laparoscopic Cholecystectomy With Operative Cholangiogram	
1045	Laparoscopic Cholecystectomy Converted To Open With Operative Cholangiogram	
1046	Laparoscopic Cholecystectomy And Nissen Repair or Wrap	
1047	Laparoscopic Cholecystectomy Converted To Open	
1050	Cholecystectomy And Choledochotomy Including Any Choledochoscopy	
1084	Insertion of peritoneal shunt	
1085	Insertion Of Oesophageal Stent	
1110	Gastrectomy - Partial	
1120	Gastrectomy - Total (Abdominal, Thoracic, Or Combined Approach)	
1125	Total Gastrectomy And Oesophagectomy By Abdominal Transthoracic Mobilisation	
1152	E.R.C.P.	
1155	E.R.C.P. And Sphincterotomy Or Stenting	
1159	Toupet Fundoplication - Adult - Open	
1160	Hiatus Hernia Repair	

SC code	Description of Surgical Procedure	Median total price (\$)
1161	Toupet Fundoplication - Adult - Laparoscopic	9,412
1164	Oesophageal Manometry Test	575
1165	Toupet Fundoplication - Paediatric	
1166	Oesophageal 24Ph Monitoring	652
1167	Non-endoscopic Dilation Of Oesophagus	
1168	Anorectal Physiology Study	
1169	Gastric Emptying study	
1170	Laparoscopic Hiatus Hernia Repair	
1174	Needle Biopsy Of Liver (separate procedure)	
1180	Laparotomy	
1181	Laparotomy Including Appendectomy	
1182	Repair Of Sphincter Of Oddi	
1183	Repair Of Pancreatic Duct Sphincter	
1184	Cholecho-jejunosomy or choledoco-duodenostomy	
1185	Small Bowel Resection	
1186	Laparoscopic Small Bowel Resection	
1188	Biopsy of Liver open, incidental	
1189	Biopsy of Liver - With Ultrasound Guidance (Separate procedure)	1,135
1191	Hepatic Cryotherapy	
1192	Liver Lobectomy (Right Or Left)	
1193	Hepatectomy	
1194	Radio frequency ablation of the liver	
1220	Oesophagectomy - One Stage	
1221	Oesophagectomy By Abdominal And Transthoracic Mobilisation, With Thoracic Oesophagogastric Anastomosis	
1230	Oesophagus - Hellers Operation	
1240	Pancreas - Total Excision Of, Or Pancreatico-Duodenectomy	
1241	Excision Of Pancreatic Tumour	
1242	Whipples Procedure	
1248	Transanal Excision Of Rectal Tumour	
1249	Transanal Endoscopic Microsurgery (TEM)	
1250	Resection Of Rectum - Abdominoperineal	
1260	Anterior Resection Of Rectum - Low With Coloanal Anastomosis	
1261	Anterior Resection Of Rectum - Ultra Low With Coloanal Anastomosis	
1262	Anterior Resection Of Rectum - Low With Extraperitoneal Anastomosis	
1263	Anterior Resection Of Rectum - High With Intraperitoneal Anastomosis	
1264	Laparoscopic Anterior Resection Of Rectum - Low With Coloanal Anastomosis	
1265	Laparoscopic Anterior Resection Of Rectum - Ultra Low With Coloanal Anastomosis	

SC code	Description of Surgical Procedure	Median total price (\$)
1266	Laparoscopic Anterior Resection Of Rectum - Low With Extraperitoneal Anastomosis	
1267	Laparoscopic Anterior Resection Of Rectum - High With Intraperitoneal Anastomosis	
1270	Prolapse Of Rectum - Abdominal Rectopexy	
1271	Prolapse Of Rectum - Excision Of Rectal Mucosa (Including Sigmoidoscopy)	
1272	Implantation Of Inflatable Sphincter -Anal	
1274	Formalin Treatment for Radiation Proctitis	
1275	Dynamic Graciloplasty	
1280	Prolapse Of Rectum - Laparoscopic Rectopexy	
1290	Splenectomy	
1291	Laparoscopic Splenectomy	
1175	Highly Selected Vagotomy	
45	Insertion of Seton Tube	
1016	Insertion of gastrostomy	
1187	Laparoscopic Liver Biopsy	
972	Laparoscopic reversal of Hartmann's procedure	
973	Reversal of Hartmann's procedure	
	Affiliated Provider only procedures.	
	The following procedures are only covered when performed by an Affiliated Provider . (Policy limits will apply. Prior to receiving treatment your Affiliated Provider will advise the balance payable by you.)	
	Examination Of Colon Up To Splenic Fixture (Short Colonoscopy With Biopsy)	
	Colonoscopy	
	Screening Colonoscopy	
	Colonoscopy With Biopsy	
	Colonoscopy With Removal Of Polyps	
	Gastroscopy And Colonoscopy	
	Gastroscopy (With Or Without Biopsy)	
	Gastroscopy and Colonoscopy With Removal Of Polyps	
	Gastroscopy and Colonoscopy with biopsy	
	Oesophageal Dilation With Gastroscopy	
	Wireless Capsule Endoscopy	
	Endoscopic Mucosal Resection	
	Argon Plasma Coagulation	
	Head and Neck	
210	Branchial Fistula	

SC code	Description of Surgical Procedure	Median total price (\$)
305	Sublingual gland excision	
306	Simple Lymph Node Dissection of Neck	3,575
320	Glands - Supra Hyoid Dissection Of Neck (Selective - Supra hyoid)	
584	Radical Neck Dissection	
585	Superficial Parotidectomy	
590	Total Parotidectomy (Including Superficial)	
591	Partial parotidectomy	
592	Subtotal parotidectomy	
593	Radical parotidectomy	
600	Parathyroidectomy	
720	Excision Of Sub-Mandibular Gland	
740	Excision Of Thyroglossal Cyst Or Fistula	
745	Thyroplasty	
781	Total Thyroid Lobectomy	7,782
785	Total (Or Sub-Total) Thyroidectomy	8,956
791	Thyroidectomy Including Para-Thyroid Transplant	
800	Tongue - Partial Removal, Hemi-Glossectomy	
801	Biopsy Of Tongue	
9600	Salivary Gland - Intra Oral Removal Duct Calculus	
	Lymph Nodes	
306	Nodal excision	
584	Radical Neck Dissection	
586	Selective neck dissection I-IV	
587	Modified radical neck dissection	
588	Extended radical neck dissection	
	Hernia	
330	Repair Of Umbilical Hernia - Under 10 Years	
340	Repair Of Minor Umbilical Hernia - Adult	4,267
350	Repair Of Major Umbilical Hernia - Adult	4,903
355	Repair Of Epigastric Hernia	4,610
361	Repair Of Incisional Hernia	6,842
370	Repair Of Complicated Incisional Hernia	
381	Unilateral Hernia - Femoral Repair	
382	Unilateral Hernia - Inguinal Repair	4,754
383	Spigelian Hernia	
385	Unilateral Laparoscopic Hernia - Inguinal Repair	6,004
386	Unilateral Laparoscopic Hernia - Femoral Repair	
387	Repair Of Laparoscopic Incisional Hernia	

SC code	Description of Surgical Procedure	Median total price (\$)
390	Bilateral Hernia - Inguinal Repair	
391	Bilateral Hernia - Femoral Repair	
395	Bilateral Laparoscopic Hernia - Inguinal	7,559
396	Bilateral Laparoscopic Hernia - Femoral	
411	Inguinal Herniotomy - Under 3 Years	
420	Bilateral Inguinal Herniotomies - Under 3 Years	
430	Hernia - Under 3 Years - Strangulated	
	Skin and Superficial Structures	
10	Abscess - Small, Or Cellulitis Requiring Incision And Drainage With Local Anaesthetic	
20	Abscess - Large, Or Extensive Cellulitis Requiring Incision Or Drainage	
100	Aspiration Of Cyst / Needle Biopsy (Breast)	152
101	Fine Needle Aspiration	195
238	Biopsy Of Skin And Subcutaneous Tissue	165
239	Cryosurgery	80
242	Electrosurgery, Hyfrecaction	215
280	Removal of Foreign Body (simple)	
292	Excision Of Ganglion - Other	2,985
293	Excision Of Ganglion - Wrist / Hand	2,726
500	Aspiration Of Small Haematoma	
6701	<2.5cm Skin Lesion Excision with Direct Closure on Trunk/Extremities (Under LA) Total Fee	
6702	2.5-7.5cm Skin Lesion Excision with Direct Closure on Trunk/Extremities (Under LA) Total Fee	
6703	7.5-12.5cm Skin Lesion Excision with Direct Closure on Trunk/Extremities (Under LA) Total Fee	
6704	12.5-20cm Skin Lesion Excision with Direct Closure on Trunk/Extremities (Under LA) Total Fee	
6705	20-30cm Skin Lesion Excision with Direct Closure on Trunk/Extremities (Under LA) Total Fee	
6706	31+cm Skin Lesion Excision with Direct Closure on Trunk/Extremities (Under LA) Total Fee	
6707	2.5-7.5cm Skin Lesion Excision with Flap Closure on Trunk/Extremities (Under LA) Total Fee	
6708	7.5-12.5cm Skin Lesion Excision with Flap Closure on Trunk/Extremities (Under LA) Total Fee	
6709	12.5-20cm Skin Lesion Excision with Flap Closure on Trunk/Extremities (Under LA) Total Fee	
6710	20-30cm Skin Lesion Excision with Flap Closure on Trunk/Extremities (Under LA) Total Fee	

SC code	Description of Surgical Procedure	Median total price (\$)
6711	31+cm Skin Lesion Excision with Flap Closure on Trunk/Extremities (Under LA) Total Fee	
6712	<2.5cm Skin Lesion Excision with Graft Closure on Trunk/Extremities (Under LA) Total Fee	
6713	2.5-7.5cm Skin Lesion Excision with Graft Closure on Trunk/Extremities (Under LA) Total Fee	
6714	7.5-12.5cm Skin Lesion Excision with Graft Closure on Trunk/Extremities (Under LA) Total Fee	
6715	12.5-20cm Skin Lesion Excision with Graft Closure on Trunk/Extremities (Under LA) Total Fee	
6716	20-30cm Skin Lesion Excision with Graft Closure on Trunk/Extremities (Under LA) Total Fee	
6717	31+cm Skin Lesion Excision with Graft Closure on Trunk/Extremities (Under LA) Total Fee	
6718	<2.5cm Skin Lesion Excision with Direct Closure on Face (Under LA) Total Fee	
6719	2.5-5cm Skin Lesion Excision with Direct Closure on Face (Under LA) Total Fee	
6720	5-7.5cm Skin Lesion Excision with Direct Closure on Face (Under LA) Total Fee	
6721	7.5-12.5cm Skin Lesion Excision with Direct Closure on Face (Under LA) Total Fee	
6722	12.5-20cm Skin Lesion Excision with Direct Closure on Face (Under LA) Total Fee	
6723	21+cm Skin Lesion Excision with Direct Closure on Face (Under LA) Total Fee	
6724	<2.5cm Skin Lesion Excision with Flap Closure on Face (Under LA) Total Fee	
6725	2.5-5cm Skin Lesion Excision with Flap Closure on Face (Under LA) Total Fee	
6726	5-7.5cm Skin Lesion Excision with Flap Closure on Face (Under LA) Total Fee	
6727	7.5-12.5cm Skin Lesion Excision with Flap Closure on Face (Under LA) Total Fee	
6728	12.5-20cm Skin Lesion Excision with Flap Closure on Face (Under LA) Total Fee	
6729	21+cm Skin Lesion Excision with Flap Closure on Face (Under LA) Total Fee	
6730	<2.5cm Skin Lesion Excision with Graft Closure on Face (Under LA) Total Fee	
6731	2.5-5cm Skin Lesion Excision with Graft Closure on Face (Under LA) Total Fee	
6732	5-7.5cm Skin Lesion Excision with Graft Closure on Face (Under LA) Total Fee	

SC code	Description of Surgical Procedure	Median total price (\$)
6733	7.5-12.5cm Skin Lesion Excision with Graft Closure on Face (Under LA) Total Fee	
6734	12.5-20cm Skin Lesion Excision with Graft Closure on Face (Under LA) Total Fee	
6735	21+cm Skin Lesion Excision with Graft Closure on Face (Under LA) Total Fee	
6736	<2.5cm Skin Lesion Excision with Direct Closure on Trunk/Extremities Under GA/Accr Hosp or daystay	
6737	2.5-7.5cm Skin Lesion Excision with Direct Closure on Trunk/Extremities Under GA/Accr Hosp or daystay	
6738	7.5-12.5cm Skin Lesion Excision with Direct Closure on Trunk/Extremities Under GA/Accr Hosp or daystay	
6739	12.5-20cm Skin Lesion Excision with Direct Closure on Trunk/Extremities Under GA/Accr Hosp or daystay	
6740	20-30cm Skin Lesion Excision with Direct Closure on Trunk/Extremities Under GA/Accr Hosp or daystay	
6741	31+cm Skin Lesion Excision with Direct Closure on Trunk/Extremities Under GA/Accr Hosp or daystay	
6742	2.5-7.5cm Skin Lesion Excision with Flap Closure on Trunk/Extremities Under GA/Accr Hosp or daystay	
6743	7.5-12.5cm Skin Lesion Excision with Flap Closure on Trunk/Extremities Under GA/Accr Hosp or daystay	
6744	12.5-20cm Skin Lesion Excision with Flap Closure on Trunk/Extremities Under GA/Accr Hosp or daystay	
6745	20-30cm Skin Lesion Excision with Flap Closure on Trunk/Extremities Under GA/Accr Hosp or daystay	
6746	31+cm Skin Lesion Excision with Flap Closure on Trunk/Extremities Under GA/Accr Hosp or daystay	
6747	<2.5cm Skin Lesion Excision with Graft Closure on Trunk/Extremities Under GA/Accr Hosp or daystay	
6748	2.5-7.5cm Skin Lesion Excision with Graft Closure on Trunk/Extremities Under GA/Accr Hosp or daystay	
6749	7.5-12.5cm Skin Lesion Excision with Graft Closure on Trunk/Extremities Under GA/Accr Hosp or daystay	
6750	12.5-20cm Skin Lesion Excision with Graft Closure on Trunk/Extremities Under GA/Accr Hosp or daystay	
6751	20-30cm Skin Lesion Excision with Graft Closure on Trunk/Extremities Under GA/Accr Hosp or daystay	
6752	31+cm Skin Lesion Excision with Graft Closure on Trunk/Extremities Under GA/Accr Hosp or daystay	
6753	<2.5cm Skin Lesion Excision with Direct Closure on Face Under GA/Accr Hosp or daystay	
6754	2.5-5cm Skin Lesion Excision with Direct Closure on Face Under GA/Accr Hosp or daystay	

SC code	Description of Surgical Procedure	Median total price (\$)
6755	5-7.5cm Skin Lesion Excision with Direct Closure on Face Under GA/Accr Hosp or daystay	
6756	7.5-12.5cm Skin Lesion Excision with Direct Closure on Face Under GA/Accr Hosp or daystay	
6757	12.5-20cm Skin Lesion Excision with Direct Closure on Face Under GA/Accr Hosp or daystay	
6758	21+cm Skin Lesion Excision with Direct Closure on Face Under GA/Accr Hosp or daystay	
6759	<2.5cm Skin Lesion Excision with Flap Closure on Face Under GA/Accr Hosp or daystay	
6760	2.5-5cm Skin Lesion Excision with Flap Closure on Face Under GA/Accr Hosp or daystay	
6761	5-7.5cm Skin Lesion Excision with Flap Closure on Face Under GA/Accr Hosp or daystay	
6762	7.5-12.5cm Skin Lesion Excision with Flap Closure on Face Under GA/Accr Hosp or daystay	
6763	12.5-20cm Skin Lesion Excision with Flap Closure on Face Under GA/Accr Hosp or daystay	
6764	21+cm Skin Lesion Excision with Flap Closure on Face Under GA/Accr Hosp or daystay	
6765	<2.5cm Skin Lesion Excision with Graft Closure on Face Under GA/Accr Hosp or daystay	
6766	2.5-5cm Skin Lesion Excision with Graft Closure on Face Under GA/Accr Hosp or daystay	
6767	5-7.5cm Skin Lesion Excision with Graft Closure on Face Under GA/Accr Hosp or daystay	
6768	7.5-12.5cm Skin Lesion Excision with Graft Closure on Face Under GA/Accr Hosp or daystay	
6769	12.5-20cm Skin Lesion Excision with Graft Closure on Face Under GA/Accr Hosp or daystay	
6770	21+cm Skin Lesion Excision with Graft Closure on Face Under GA/Accr Hosp or daystay	
25	Debridement of infected wound area & closure	
26	Debridement of infected wound/fistula/sinus	
6650	MoHs surgery 1 specimen (excision and microscopy)	
6651	MoHs surgery 2 specimens (excision and microscopy)	
6652	MoHs surgery 3+ specimens (excision and microscopy)	
	Affiliated Provider only procedures.	
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	Varicose veins	

SC code	Description of Surgical Procedure	Median total price (\$)
	Sclerotherapy	
	Unilateral Varicose Veins, Minor Resection	
	Bilateral Varicose Veins, Minor Resection	
	Unilateral Varicose Veins, Major Resection	
	Bilateral Varicose Veins, Major Resection	
	Unilateral Varicose Veins , Strip And Local Excision And Operation For Perforators	
	Bilateral Varicose Veins , Strip And Local Excision And Operation For Perforators	
	Unilateral Varicose Veins - Incompetent Perforators	
	Bilateral Varicose Veins - Incompetent Perforators	
	Unilateral Varicose Veins - Short Saphenous	
	Endoscopic Ligation Of Perforating Veins	
	Bilateral Varicose Veins - Short Saphenous	
	Sclerotherapy	
	Lung/chest	
1200	Lung, Lobectomy	
1201	Lung Biopsy - Percutaneous	
1202	Lung Biopsy - Open	
1203	Lung Exploration	
1204	Lung Biopsy - Bronchoscopic	
1205	Lung Biopsy - Bronchoscopic - Fibreoptic	
1206	Chest Biopsy, Thoracotomy	
1207	Mediastenoscopy	
1208	Thorascopic Pleurodesis Stapling Bullae	
1209	Excision Thymoma With Sternotomy	
1212	Chest Biopsy, Needle	
	Miscellaneous	
1301	Insertion Of Port-A-Cath	5,836
1302	Central Vein Catheterisation	
1303	Percutaneous Central Vein Catheterisation	
1304	Removal Of Port-A-Cath	
	SECTION 2: OTOLARYNGOLOGY	
	Throat	
800	Hemiglossectomy	

SC code	Description of Surgical Procedure	Median total price (\$)
801	Partial glossectomy per-oral	
803	Partial glossectomy drop through	
804	Subtotal glossectomy	
805	Total glossectomy	
1701	Tonsillectomy Alone - Adult	3,377
1706	Tonsillectomy And Adenoidectomy - Child	
1707	Tonsillectomy And Adenoidectomy (adult)	
1710	Tonsillectomy Alone - Child	3,079
1711	Tonsillectomy, Grommets With Cautery Of Turbinates	
1712	Tonsillectomy, Grommets (Bilat) With Cautery Of Turbinates - Child	
1713	Tonsillectomy, Grommets (Unilat) With Cautery Of Turbinates - Child	
1714	Adenotonsillectomy, Grommets (Bilat) With Cautery Of Turbinates - Child	
1715	Adenotonsillectomy, Grommets (Unilat) With Cautery Of Turbinates - Child	
1717	Tonsillectomy With Grommet Insertion - Unilateral - Child	
1718	Tonsillectomy With Grommet Insertion - Bilateral - Child	
1719	Adenotonsillectomy With Grommet Insertion - Unilateral - Child	
1720	Adenotonsillectomy With Grommet Insertion - Bilateral - Child	
1721	Tonsillectomy With Septoplasty	
1722	Partial pharyngectomy	
1723	Tonsillectomy, Adenoidectomy, Grommets With Antral Lavage	
1724	Adenotonsillectomy, Grommets (Bilat) With Antral Lavage - Child	
1725	Tonsillectomy With Antral Lavage - Adult	
1726	Tonsillectomy With Antral Lavage - Child	
1727	Tonsillectomy With Cautery Of Turbinates - Adult	
1728	Tonsillectomy With Cautery Of Turbinates - Child	
1729	Adenotonsillectomy, Grommets (Unilat) With Antral Lavage - Child	
1730	Adenoidectomy	2,615
1735	Adenoidectomy And Cautery Of Turbinates	
1741	Adenoidectomy With Bilateral Grommet Insertion	
1744	Fixation mandibular reconstruction plate	
1745	Segmental mandibulectomy	
1746	Marginal mandibulectomy	
1747	Hemi-mandibulectomy	
1748	Condylectomy	
1749	Coronoidectomy	
1750	Uvulopalatopharyngoplasty (Uppp)	
1755	Uvulopalatopharyngoplasty & Septoplasty	
1756	Uvulopalatopharyngoplasty, Septoplasty And Reduction Of Turbinates	
1757	Tracheostomy	

SC code	Description of Surgical Procedure	Median total price (\$)
1758	Floor of mouth excision	
	Hypopharynx and Larynx	
1760	Pharyngoscopy	
1770	Pharyngoscopy With Biopsy	
1775	Excision of Malignant Tumour of Upper Aerodigestive Tract	
1780	Removal Of Pharyngeal Pouch	
1781	Excision and stapling Hypopharyngeal Diverticulum, Cricopharyngeal Myotomy	
1790	Laryngoscopy - With Or Without Biopsy	
1800	Micro-Laryngoscopy With Or Without Biopsy	30
1805	Partial laryngectomy	
1806	Total laryngectomy	
1785	Dohlman's procedure	
	Trachea, Bronchi and Oesophagus	
1830	Bronchoscopy - Fibreoptic	
1840	Bronchoscopy With Removal Of Foreign Body	
1860	Oesophagoscopy	
1861	Oesophagoscopy - With Biopsy	
1870	Pan-Endoscopy - Including Laryngoscopy, Pharyngoscopy, Oesophagoscopy & E.U.A Nasopharynx	
1875	Tracheal resection	
	Ears	
2010	Pinnectomy	
2015	Lateral temporal bone resection	
2020	Foreign Body Ear - Surgical Removal	
2030	Removal Solitary Osteoma Ear Canal	
2040	Removal Of Multiple Exostoses - Ear Canal	6,928
2050	Meatoplasty	
2060	Myringotomy	
2080	Unilateral Grommet Insertion (Including Myringotomy)	
2082	Bilateral Grommet Insertion (Including Myringotomy)	1,439
2085	Removal Of Grommets	1,222
2090	Tympanotomy - Unilateral	
2100	Tympanotomy - Plus Division Of Nerves Or Adhesions	
2110	Tympanotomy Plus Ossiculoplasty	
2120	Myringoplasty - Transcanal	
2130	Tympanoplasty (Myringoplasty Postaural Or Endaural)	

SC code	Description of Surgical Procedure	Median total price (\$)
2140	Tympanoplasty plus Ossiculoplasty	
2150	Stapedectomy	
2180	Tympanotomy Plus Repair Of Perilymph Fistula	
2190	Endolymphatic Sac, Decompression (With Or Without Shunt Insertion)	
2210	Cortical Mastoidectomy Or Atticotomy	
2220	Cortical Mastoidectomy Or Atticotomy Plus Myringoplasty	
2230	Atticotomy Plus Tympanoplasty	
2231	Cortical Mastoidectomy Plus Tympanoplasty	
2240	Modified Radical Mastoidectomy Or Mastoidectomy With Posterior Tympanotomy (Cat)	
2260	Modified Radical Mastoidectomy Or Cat Plus Tympanoplasty	
2261	Cochlear Implant Surgery (Excluding The Cost Of The Appliance)	
	Nose & Paranasal Sinuses	
1880	Bilateral Antral Lavage	
1920	Nasal Polyp Or Polypi - Unilateral	
1930	Nasal Polyp Or Polypi - Bilateral	
1940	Transnasal Ethmoidectomy	
1945	Endoscopic Maxillary Antrostomy - unilateral	
1946	Endoscopic Maxillary Antrostomy - bilateral	
1950	Radical Antrostomy (Caldwell Luc)	
1960	Radical Antrostomy - With Trans-Antral Ethmoidectomy (Jansen Horgan)	
1968	Endoscopic Powered Turbinoplasty	
1969	Sinoscopy	
1970	Endoscopic Sinus Surgery	
1972	Endoscopic Sinus Surgery - Bilateral	7,216
1976	Endoscopic Sinus Surgery - Bilateral And Septoplasty	
1980	Endoscopic Modified Lothrop	
1990	External Fronto-Ethmoidectomy	
2000	Radical Fronto-Ethmoidectomy	
2270	Reduction Of Nasal Fracture	
2280	Foreign Body In Nose - Removal Of, Other Than Simple Probing	
2290	Cautery Of Septum Or Turbinates	138
2300	Cautery Of Turbinates With Outfracture	
2310	Trimming Of Turbinates - Total - Bilateral	
2320	Septoplasty	
2321	Crural J flap (bilateral)	
2330	Septoplasty With Cautery Or Diathermy Of Turbinates, With Or Without Outfracture	4,481
2336	Conchal Cartilage Graft	

SC code	Description of Surgical Procedure	Median total price (\$)
2337	Septoplasty With Trimming Of Turbinates	
2340	Septo-Rhinoplasty	
2350	External Septo Rhinoplasty	
2355	Rhinectomy	
2360	Excision maxillary tuberosity	
2361	Posterior maxillectomy	
2362	Medial maxillectomy	
2363	Subtotal maxillectomy	
2364	Total maxillectomy	
2365	Extended total maxillectomy	
2370	Orbital exenteration	
2371	External ethmoidectomy	
2375	Inferior craniofacial resection	
2380	Nasendoscopy	70
2390	Examination Of Nasopharynx And Biopsy	
	SECTION 3: UROLOGY	
	Kidney	
2554	Biopsy of Kidney - Ultrasound Guided	
2555	Closed Biopsy of Kidney	
2560	Nephrectomy - Simple	
2570	Nephrectomy - Partial	
2580	Nephrectomy - Radical	
2581	Open/Laparoscopic Adrenalectomy	
2585	Laparoscopic nephrectomy	
2586	Laparoscopic partial nephrectomy	
2590	Nephroureterectomy	
2610	Pyelolithotomy	
2620	Nephrolithotomy - Major More Than 120 Minutes	
2630	Nephrostomy - Open	
2640	Nephrostomy - Percutaneous	
2641	Nephrostomy Tract Establishment By Urologist	
2642	Percutaneous Nephroscopy and Lithotomy Less Than 90 Minutes	
2644	Percutaneous Nephroscopy and Lithotomy - More Than 90 Minutes	
2650	Pyeloplasty	
2652	Laparoscopic Pyeloplasty	
2662	Endopyelotomy - Retrograde	
2664	Endopyelotomy - Antegrade	

SC code	Description of Surgical Procedure	Median total price (\$)
2680	Percutaneous Pyelolithotomy	
2685	Extracorporeal Shockwave Lithotripsy	6,634
	Affiliated Provider only procedures.	
	The following procedures are only covered when performed by an Affiliated Provider . (Policy limits will apply. Prior to receiving treatment your Affiliated Provider will advise the balance payable by you.)	
	Laparoscopic renal cryotherapy	
	Ureter	
2682	Insertion Of Double J Stent	
2690	Ureteroscopy With Minor Additional Procedure	
2692	Ureteroscopy With Major Additional Procedure	
2700	Reimplantation Ureter - Unilateral	
2710	Reimplantation Ureter - Bilateral	
2720	Ureterolithotomy	
2770	Ureterolysis	
2780	Reduction Ureteroplasty And Reimplant - 1st Stage	
2790	Reduction Ureteroplasty And Reimplant - 2nd Stage	
	Bladder	
2442	Colposuspension - Open	
2444	Needle Colposuspension, Endoscopic Bladder Neck Suspension Or Similar	
2850	Cystoscopy and urethroscopy	530
2851	Cystoscopy - With Biopsy, Ureteric Catheterization, Urethral Dilatation, Removal Stent, Or Other Minor Procedure	3,009
2852	Flexible Cystourethroscopy Under Local Anaesthetic	678
2853	Flexible Cystourethroscopy Under Local Anaesthetic - With Biopsy, Ureteric Catheterization, Urethral Dilatation, Removal Stent, Or Other Minor Procedure	600
2854	Cystoscopy and Transrectal Ultrasound and Biopsy (TRUS)	3,477
2855	Cystourethroscopy - With Bladder Neck Incision Or Major Visual Urethrotomy	3,975
2856	Retrograde pyelogram	
2900	Transurethral Resection Bladder Tumour -Minor <30Min	
2910	Transurethral Resection Bladder Tumour -Major >30Min	4,694
2920	Cystoscopy - Removal Ureteric Calculus Or Foreign Body	
2930	Cystoscopic Destruction And Removal Bladder Calculus / Litholopaxy	
2940	Incision Of Bladder Neck	
2950	Total Or Radical Cystectomy With Ileal Conduit Diversion	
2951	Total Or Radical Cystectomy With Replacement Cystoplasty Ectopic With Continent Stoma	

SC code	Description of Surgical Procedure	Median total price (\$)
2952	Cystectomy Plus Bladder Reconstruction	
2953	Total Or Radical Cystectomy With Replacement Cystoplasty Orthotopic	
2960	Bladder - Repair Of Rupture	
2970	Bladder Tumours, Suprapubic Diathermy Of	
2981	Cystoscopic Destruction And Removal Bladder Calculus - Minor Less Than 30 Minutes	
2982	Cystoscopic Destruction And Removal Bladder Calculus - Major More Than 30 Minutes	
2983	Laser Resection Of Bladder Tumour - Minor	
2984	Laser Resection Of Bladder Tumour - Major	
2985	Cystolithotomy	
2990	Diverticulum Of Bladder, Excision Or Obliteration Of	
3030	Cystoplasty	
3322	Laparoscopic Colposuspension	
3670	Ventro-Suspension	
3040	Partial Cystectomy	
	Prostate	
315	Inguinal Node Dissection	
2800	Open Enucleation Prostate	
2810	Transurethral Resection Prostate	6,858
2811	TURP Including Cystoscopy	7,309
2815	Laser Resection Prostate including Cystoscopy	9,198
2816	Transurethral Needle Ablation Of Prostate	
2825	Perineal Prostatectomy	
2829	Radical Retropubic Prostatectomy	14,532
2830	Radical Retropubic Prostatectomy -With Synchronous Node Dissection	17,577
2832	Pelvic Node Dissection	
2833	Laparoscopic Pelvic Node Dissection	
2840	Prostate - Needle Biopsy	450
	Affiliated Provider only procedures.	
	The following procedures are only covered when performed by an Affiliated Provider . (Policy limits will apply. Prior to receiving treatment your Affiliated Provider will advise the balance payable by you.)	
	Laparoscopic Prostatectomy	
	Laparoscopic Prostatectomy with Node Dissection	
	Brachytherapy	
	Prostate Cryotherapy	
	Incontinence	

SC code	Description of Surgical Procedure	Median total price (\$)
2420	Pubo-Vaginal Sling Operation For Incontinence	6,863
2425	TVT Sling Revision	
2440	Implantation Artificial Urinary Sphincter	
2446	Male Sling operation	
	Urethra	
2400	Caruncle - Cauterisation	
2430	Incontinence - Peri-Urethral Injection	
2460	Urethrectomy	
2470	Urethroplasty - Stage 1	
2480	Urethroplasty - Stage 2	
2490	Urethroplasty Including Stricture Repair, Urethral Diverticulum - Minor	
2491	Urethroplasty Including Stricture Repair, Urethral Diverticulum Major	
2500	Urethroplasty - One Stage Trans Pubic	
2510	Urethroplasty - Revision For Recurrent Stricture	
2520	Meatoplasty (Urethra)	
2530	Urethral Calculus	
2540	Urethrotomy - Internal	
2550	Urethral Diverticulum	
	Scrotum	
560	Orchidectomy - High Ligation	
571	Orchidopexy - Unilateral	
580	Orchidopexy - Bilateral	
820	Varicocele Repair- Inguinal	
825	Varicocele Repair- Laparoscopic	
3073	Excision of Epididymal Cyst Spermatocele, or Epididymectomy - Unilateral	3,707
3074	Excision of Epididymal Cysts Spermatocele, or Epididymectomy - Bilateral	
3075	Hydrocele Repair - Unilateral	3,850
3076	Hydrocele Repair - Bilateral	
3100	Testicular Biopsy	
3111	Undescended Testis - Laparoscopy For	
3115	Bilateral Scrotal Orchidectomies	
3120	Radical Orchidectomy	
3125	Testicular Prosthesis Insertion	
	Penis	
231	Circumcision	2,981
3077	Dorsal Slit	

SC code	Description of Surgical Procedure	Median total price (\$)
3079	Penile Biopsy	
3080	Penis - Amputation	
3090	Penile Plication For Peyronies	
3140	Penile Prosthesis - Semi Rigid	
3150	Penile Prosthesis - Inflatable	
3151	Priapism - Aspiration And Irrigation	
3152	Priapism - Winter's Procedure	
3153	Priapism - Intrapenile Shunts	
3154	Priapism - Caverno-Femoral Shunt Or Similar	
	Clinic Procedures	
2450	Catheterisation	
2451	Catheterisation - With Instillation Drugs	
2452	Urethral Dilatation	128
2881	Cystoscopy With Urodynamic Assessment	
3078	Diathermy Penile Warts Or Minor Genital Skin Lesion Excision	
3155	Vasectomy (NB: Loyalty Benefit)	460
3157	Vasectomy (GP) (NB: Loyalty Benefit)	420
6405	Transrectal Ultrasound And Biopsy of Prostate	690
	SECTION 4: GYNAECOLOGY	
	Vulva	
3180	Bartholins Cyst / Abscess Surgery	2,619
3420	Incision Of Hymen	
3421	Separation Of Labial Fusion	
3480	Fenton's Procedure	
3490	Simple Excision Vulval Lesion - Unilateral (including excision varicocele)	
3491	Simple Excision Vulval Lesion - Bilateral	
3500	Vulva - Radical Excision Of, With Glands	
3510	Simple Vulvectomy	
3520	Warts - Vulval, Cauterisation Or Laser	
3529	Vulval Biopsy - Office	180
3530	Multiple Vulval Biopsy	
	Vagina	
3261	Revision of Episiotomy Scar (not cosmetic)	
3270	Anterior Colporrhaphy	
3275	Anterior Colporrhaphy Mesh Repair	

SC code	Description of Surgical Procedure	Median total price (\$)
3276	Minor Revision Mesh Repair	
3280	Colporrhaphy - Anterior And Amputation Of Cervix	
3290	Anterior And Posterior Colporrhaphy	6,288
3300	Posterior Colporrhaphy	
3305	Posterior Colporrhaphy Mesh Repair	
3310	Posterior Colporrhaphy And Enterocoele	
3311	Repair of enterocele, vaginal approach (separate procedure)	
3315	Vault Repair, i.e. Sacrospinous Fixation	
3325	Open Sacrocolpopexy, Levatoplasty	
3410	Examination Under Anaesthetic	
3460	Recto-Vaginal Fistula - Repair Of	
3470	Vesico-Vaginal Fistula - Repair Of	
3485	Excision Of Vaginal Lesion	
3595	Laparoscopic Pelvic Floor Repair	
3596	Vaginal reconstruction disease related	
3285	Vaginoplasty	
	Cervix	
3220	Cervix - Amputation Or Reconstruction	
3230	Cervix - Biopsy Under Anaesthetic	
3240	Cryotherapy of cervix	
3250	Cervix Cauterisation Of - With Anaesthesia	
3330	Colposcopy With Biopsy	205
3375	Cervical Polypectomy	100
3405	Lletz Loop	1,640
3406	Laser Cone Biopsy and or ablation	
3407	Laser Ablation	
3408	Cone Biopsy	
	Uterus	
3170	Abscess - Pelvic, Drainage Of, Via Fornices	
3340	D & C With Reuben's Test	
3350	D & C With Biopsy Of Cervix	
3360	D&C With Cone Biopsy Of Cervix	
3370	D&C With Removal Of Polyp - Uterus	
3371	D&C With Removal Of Polyp - Cervix	
3380	D&C After Miscarriage	2,632
3390	Endometrial Biopsy (Pipelle)	125
3455	Laparoscopic Uterine Nerve Ablation	
3540	Hysteroscopy D&C	3,045

SC code	Description of Surgical Procedure	Median total price (\$)
3542	Hysteroscopy And Removal Of Submucous Fibroid With D&C	3,082
3543	Hysteroscopy And Removal Of Endometrial Polyp With D&C	
3544	Insert Intra-Uterine Device	
3545	Uterine Ablation therapy	
3560	Pelvic Glands - Radical Dissection Of	
3570	Abdominal Hysterectomy	9,003
3571	Abdominal Hysterectomy With BSO	8,818
3575	Endometrial Resection / Ablation	
3576	Hysteroscopy and Radiofrequency endometrial ablation	
3577	Hysteroscopy and Microwave endometrial ablation	
3580	Hysterectomy - Total And Marshall Marchetti Procedure	
3585	Total Abdominal Hysterectomy & Bilateral Salpingo-Oophorectomy & Omentectomy +/- Nodes	
3590	Vaginal Hysterectomy With Pelvic Repair	
3600	Vaginal Hysterectomy	7,712
3610	Wertheims Hysterectomy	
3613	Subtotal lap hysterectomy	
3614	Laparoscopically Assisted Vaginal Hysterectomy	12,026
3615	Laparoscopically Assisted Vaginal Hysterectomy With BSO	
3616	Laparoscopically assisted Vaginal Hysterectomy With Division Of Adhesions	
3630	Abdominal Myomectomy	
3632	Laparoscopic Myomectomy	
	Fallopian tubes - Ovaries	
3160	Laparoscopic Sterilisation (NB Loyalty Benefit)	
3162	Essure - Sterilisation (NB Loyalty Benefit)	
3440	Diagnostic Laparoscopy	4,475
3445	Laparoscopy With Dye Study	
3450	Laparoscopy With D & C	
3451	Laparoscopy with Hysteroscopy and D&C and Dye Study	
3550	Ectopic Pregnancy - Removal Of	
3552	Laparoscopic Removal Of Ectopic Pregnancy	
3554	Laparoscopy with Hysteroscopy and D&C	5,418
3650	Open Oophorectomy - Unilateral	
3651	Open Oophorectomy - Bilateral	
3652	Laparoscopic Oophorectomy - Unilateral	
3653	Laparoscopic Oophorectomy - Bilateral	
3654	Unilateral Oophorectomy With Bilateral Salpingectomy	
3655	Laparoscopic Unilateral Oophorectomy With Bilateral Salpingectomy	
3660	Open Ovarian Cystectomy - Unilateral	

SC code	Description of Surgical Procedure	Median total price (\$)
3661	Open Ovarian Cystectomy - Bilateral	
3662	Laparoscopic Ovarian Cystectomy - Unilateral	
3663	Laparoscopic Ovarian Cystectomy - Bilateral	
3665	P.C.O.S. Laparoscopic Drilling Of Ovaries	
3666	Laparoscopic Division Of Adhesions To Ovaries	
3667	Microsurgery and Reanastomosis of Tubes and Ovaries	
3689	Biopsy Of Ovary	
3690	Open Salpingectomy	
3691	Laparotomy	
3692	Laparoscopic Salpingectomy unilateral	
3700	Open Salpingo-Oophorectomy unilateral	
3701	Open Salpingo-Oophorectomy bilateral	
3702	Laparoscopic Salpingo-Oophorectomy Unilateral	
3703	Laparoscopic Salpingo-Oophorectomy, Bilateral	
3710	Salpingo Or Salpingolysis	
3712	Salpingostomy - Laparoscopic	
3720	Tubal Anastomosis (Unilateral Or Bilateral, Not After Tubal Ligation)	
3730	Laparoscopic Diathermy To Endometriosis	
3731	Laparoscopic Endometriosis Surgery - Mild	6,412
3732	Laparoscopic Endometriosis Surgery - Moderate	7,722
3733	Laparoscopic Endometriosis Surgery - Severe	
3734	Endometriosis Surgery - Severe (Laparotomy)	
	SECTION 5: OPHTHALMOLOGY	
	Lids and Adnexa	
251	Xanthelasma	
3825	Removal Of Tarsal Cyst	283
3830	Entropion / Ectropion – Repair - Unilateral	1,106
3831	Entropion / Ectropion - Repair - Bilateral	1,253
3835	Correction Of Ptosis - Unilateral	2,611
3837	Correction Of Ptosis - Bilateral	
3840	Lacrimal Duct - Probing Of - Unilateral	118
3841	Lacrimal Duct - Probing Of - Bilateral	
3842	Lacrimal Intubation - Unilateral	
3845	Dacryocystorhinostomy	
3850	Minor Eyelid Surgery	250
3855	Intermediate Eyelid Surgery	885
3860	Major Eyelid Surgery	

SC code	Description of Surgical Procedure	Median total price (\$)
3861	Blepharoplasty for dermatochalasis Bilateral	2,950
3862	Blepharoplasty for dermatochalasis Unilateral	
3870	Autogenous Grafts - Major	
3871	Autogenous Grafts - Minor	
	Strabismus Surgery	
3880	Extraocular Muscles - Strabismus - One Or Two Muscles	3,873
3882	Strabismus - One Or Two Muscles - Reoperation	
3893	Extraocular Muscles - Strabismus - Three Or More Muscles	
3894	Strabismus - Three Or More Muscles - Reoperation	
3895	Extraocular muscles -strabismus and placement Of Adjustable Suture During Strabismus Surgery (Including Post-Operative Adjustments)	
	Extraocular Operations on Globe	
3920	Excision Of Pterygium - Unilateral	913
3921	Excision Of Pterygium - Bilateral	
3930	Excision Of Pterygium And Conjunctival Graft	2,628
3940	Excision Of Pinguecula	
	Cataract	
3950	Lens Extraction	
3960	Secondary Iol Implant (Monofocal only)	
3965	Iol Implant With Anterior Vitrectomy (Monofocal only)	
3970	Yag Laser Capsulotomy	350
3971	Yag Laser Capsulotomy - Bilateral	684
	Affiliated Provider only procedures.	
	The following procedures are only covered when performed by an Affiliated Provider . (Policy limits will apply. Prior to receiving treatment your Affiliated Provider will advise the balance payable by you.)	
	Extracapsular Cataract Extraction With Insertion Of Artificial Lens (Monofocal only)	
	Phacoemulsification Cataract Extraction With Insertion Of Artificial Lens (Monofocal only)	
	Phacoemulsification Cataract Extraction With Insertion Of Artificial Lens (Monofocal only) (Includes Axial Length Ultrasonography)	
	Cataract Extraction And Iol With Anterior Vitrectomy (Monofocal only)	
	Cataract Extraction With Iol With Trabeculectomy (Monofocal only) (Including First 5 Post-Op Visits)	
	Glaucoma	
3805	Bleb needling	

SC code	Description of Surgical Procedure	Median total price (\$)
3975	Trabeculectomy (Including First 5 Post-Op Visits)	4,939
3980	Trabeculectomy With Cytotoxic Agent (Including First 5 Post-Op Visits)	
3985	Drainage (Glaucoma), Molteno Drain Or Similar Procedure	
3990	Iridectomy Or Iridotomy	
4010	Laser Iridotomy	688
4011	Laser Iridotomy - Bilateral	1,180
4015	Laser Trabeculoplasty	950
4016	Laser Trabeculoplasty - Bilateral	
	Corneal Surgery	
3801	Anterior Stromal Puncture	
3910	Cornea Or Sclera - Removal Of Foreign Body	
4020	Keratectomy	
4030	Penetrating Keratoplasty Or Similar	
4040	Phototherapeutic Keratectomy - NB: On application to Southern Cross	
4026	Intrasomal corneal ring segment implantation for Kerataconus	
	Affiliated Provider only procedures.	
	The following procedures are only covered when performed by an Affiliated Provider . (Policy limits will apply. Prior to receiving treatment your Affiliated Provider will advise the balance payable by you.)	
	Corneal Cross Linking	
	Vitreo-Retinal Surgery	
4043	Intravitreal injection	750
4045	Repair Of Detached Retina - Cryotherapy Or Diathermy	
4046	Retinal Detachment Repair With Scleral Buckle	
4054	Vitrectomy	
4056	Vitrectomy With Retinal Detachment Repair	
4057	Vitrectomy With Macular Hole Surgery	
4058	Removal Of Silicone Oil	
4059	Macula Hole Eye Surgery	
4060	Complex Vitrectomy	
4064	Vitrectomy With Macular Epiretinal Membrane Peel	7,887
4065	Retinal Membrane Peeling	
4070	Retinal Cryotherapy	
4075	Photocoagulation Of Retina (Macular degeneration)	950
4076	Photocoagulation Of Retina - Bilateral	
4080	Pan Retinal Laser	
4082	Transpupillary Thermotherapy (TTT)	

SC code	Description of Surgical Procedure	Median total price (\$)
	Orbit	
4085	Evisceration Of Globe	
4086	Evisceration Of Globe - With Implant	
4090	Enucleation Of Eye	
4091	Enucleation Of Eye With Implant	
4100	Orbitotomy	
	SECTION 6: ORTHOPAEDIC SURGERY	
	Ankle/foot	
4250	Repair Of Foot Tendon - Primary Suture (Flexor Or Extensor)	
4251	Repair Of Foot Tendon - Secondary Suture (Flexor Or Extensor)	
4260	Repair Ruptured Achilles Tendon - Open, Primary	
4261	Achilles Tendon Reconstruction (Tenotomy, Percutaneous, Achilles Tendon)	
4270	Repair Ruptured Achilles Tendon - Secondary	
4280	Achilles - Elongation	
4290	Incision Of Tendon Sheath	
4310	Tendon Reconstruction - Ankle	
4355	Neurectomy Of Leg / Foot Not Elsewhere Classified	
4540	Ingrown Toenail - Radical Excision / Wedge Resection - Unilateral	1,527
4550	Ingrown Toenail - Radical Excision / Wedge Resection - Bilateral	
4580	Amputation Of Toe - MTP Joint	
4581	Amputation Of Toe - IP Joint	
5380	Arthrotomy - Ankle	
5385	Arthroscopy - Ankle	
5386	Arthroscopy Ankle And Therapeutic Procedure	
5387	Tarsal Tunnel Release	
5390	Ankle Ligament Reconstruction	
5400	Arthrodesis - Ankle	
5401	Ankle Triple Arthrodesis	
5402	Subtalar Arthrodesis	
5403	Tarsometatarsal Arthrodesis	
5404	Talo-Navicular Arthrodesis	
5410	Hind Foot Correction	
5420	Soft Tissue Correction Of Foot	
5430	Bone Correction - Tarsectomy Triple	
5431	Complex midfoot correction	

SC code	Description of Surgical Procedure	Median total price (\$)
5440	Hallux Valgus - Unilateral	
5450	Hallux Valgus - Bilateral	
5460	Arthrodesis - Great Toe	5,216
5461	Arthrodesis - Great Toe - Bilateral	
5470	Hallux Rigidus - Bilateral	
5480	Hallux Rigidus With Silastic Implant - Single	
5490	Hallux Rigidus With Silastic Implant - Bilateral	
5500	Hammer Toe Repair	
5501	Tenotomy - Toe	
5520	Correction Of Hallux Valgus By Osteotomy - First Metatarsal, Unilateral	
5522	Osteotomy - Lesser Metatarsal	
5530	Correction Of Hallux Valgus By Osteotomy - First Metatarsal, Bilateral	
5535	Ankle Replacement	
5465	Hallux Rigidus - Unilateral	
	Elbow	
4340	Tendon Transfer - Hand	
4390	Transposition Of Ulna Nerve	
4391	Open Neurolysis of peripheral nerve, not elsewhere classified	
4392	Cubital Tunnel Syndrome	
4500	Epicondylitis Release (Epicondylitis Debridement)	
5030	Elbow Replacement Arthroplasty	
5040	Supracondylar Osteotomy	
5050	Arthrotomy & Removal Of Loose Bodies - Elbow	
5051	Arthrotomy - Elbow	
5061	Arthroscopy Elbow	
5062	Arthroscopy Elbow With Procedure	
5063	Release Of Elbow Contracture	
6030	Radial Head Excision	
	General	
4255	Decompression Fasciotomy (Compartment Syndrome)	
4257	Decompression Fasciotomy (Compartment Syndrome) - Bilateral	
4380	Nerve Graft	
4420	Acute Osteomyelitis - Drainage Small Bone	
4430	Acute Osteomyelitis - Drainage Large Bone	
4440	Sub-Acute Or Chronic Osteomyelitis - Exploration	
4445	Excision Bursa	
4446	Bone Graft - Any Area, Minor Or Small	
4450	Excision Exostosis - Superficial	

SC code	Description of Surgical Procedure	Median total price (\$)
4460	Excision Of Exostosis - Deep Bone	
4541	Excision of nail and nail matrix, partial or complete - Unilateral	
4551	Excision of nail and nail matrix, partial or complete - Bilateral	
4678	Soft Tissue Injection	50
4679	Joint Injection (Unspecified)	50
4465	Removal of Sesamoid Bone	
	Hip/Upper Leg	
5156	Subcutaneous Tenotomy, Not Elsewhere Classified	
5157	Neurectomy Of Leg Nerve	
5158	Decompression Fasciotomy - Thigh / Knee	
5159	Surgical Dislocation of Hip vs Hip Arthroscopy (Chondroplasty)	
5160	Arthroplasty Hemi Or Cup	
5161	Hip Arthroscopy	
5162	Hip Arthroscopy With Therapeutic Procedure	
5163	Ganz Osteotomy	
5165	Bone Graft To Femur	
5170	Total Hip Replacement	19,062
5171	Total Hip Replacement - Bilateral	
5175	Removal Of Hip Prosthesis For Infection (Without Revision)	
5180	Revision Hip Replacement	20,392
5190	Osteotomy - Distal Femur	
5620	Hip - Closed Reduction	
6155	Removal Of Intra Medullary Rod	
6160	Femur - Slipped Epiphysis - Pinning	
6165	Femur Osteotomy	
6166	Open hip joint biopsy	
	Knee	
4620	Amputation - Above Or Below Knee	
5220	Arthrotomy For Loose Body Or Pinning	
5240	Repair Collateral Ligament - Knee	
5250	Synovectomy Of Knee	
5260	Repair Cruciate Ligament - Knee arthroscopic or open	
5261	Repair Of Patellar Tendon - Primary	
5262	Repair Of Patellar Tendon - Secondary	
5263	Patellar tendon transfer of the knee	
5284	Arthroscopy Knee - Diagnostic - Bilateral	
5285	Arthroscopy Knee - Diagnostic	

SC code	Description of Surgical Procedure	Median total price (\$)
5286	Arthroscopy Knee And Arthroscopic Procedure	4,410
5287	Arthroscopy And Meniscectomy - Bilateral	
5289	Arthroscopy And Meniscectomy	4,058
5291	Arthroscopic Chondroplasty Of Knee	
5293	Debridement Of Knee Joint	
5294	Chondroplasty of Knee	
5295	Arthroscopic Anterior Cruciate Ligament Repair And / Or Reconstruction - Knee	
5300	Patellectomy	
5310	Repair Recurrent Dislocating Patella	
5330	Knee - Osteotomy	
5350	Arthrodesis Of Knee	
5360	Partial Knee Replacement	17,046
5365	Partial Knee Replacement - Bilateral	
5370	Total Knee Replacement	20,421
5371	Total Knee Replacement - Bilateral	
5375	Revision Knee Replacement	
	Lower leg	
4252	Repair Flexor Tendon Leg - Secondary	
4253	Repair Extensor Tendon Leg - Primary	
4254	Repair Extensor Tendon Leg - Secondary	
4256	Repair Flexor Tendon Leg - Primary	
4275	Tendon Lengthening	
4300	Tibialis Anterior Transfer	
5340	Osteotomy - Proximal Tibia	
	Nervous System	
4350	Suture Of Nerve Requiring Extensive Mobilisation	
4360	Primary Suture Nerves	
4361	Suture Of Major Peripheral Nerves - Arm/Leg	
4362	Suture Of Digital Nerve - Hand / Foot	
4370	Secondary Repair Of Nerve	
4410	Excision of Neuroma	
4411	Lateral Popliteal Nerve Decompression	
4412	Excision Of Neuroma - Major Peripheral Nerves	
4510	Post Interosseous Nerve Release	
4666	Intra-Spinal Injection	
4668	Peripheral Nerve Block	
4670	Epidural Injection Anaesthetic - Lumbar / Caudal	679

SC code	Description of Surgical Procedure	Median total price (\$)
4671	Iv Guanethidine Block Or Similar	
4672	Coeliac Plexus Block	
4674	Nerve Root Injection (Trans-Foraminal)	980
4675	Stellate Ganglion Block	
	Shoulder	
4330	Biceps Tendon Release Or Tenodesis	
4960	Removal Of Calcaneous Deposits Of Shoulder	
4970	Acromioplasty/ Acromionectomy	
4972	Rotator Cuff Repair With Acromioplasty	7,588
4973	Arthroscopy & Stabilisation Of Shoulder	
4974	Arthroscopy, Decompression & Partial Acromioplasty	
4975	Rotator Cuff Repair - Simple	
4976	Shoulder Arthroscopy, Decompression And Rotator Cuff Repair	
4980	Excision Outer End Of Clavicle	
4983	Open Reduction Fracture of Clavicle	
4985	Arthroscopy- Shoulder, Diagnostic	
4986	Arthroscopy Shoulder And Other Arthroscopic Procedure	
4990	Arthrodesis Of Shoulder	
5000	Hemi Replacement Of Shoulder	
5010	Total Replacement Of Shoulder	19,812
5020	Arthroplasty Excision	
5550	Acromio-Clavicular - Open Reduction And Repair - Chronic	
5570	Manipulation Of Shoulder Joint	
5590	Repair Of Recurrent Dislocation	
	Spine	
4676	Facet Joint Injection	
4677	Intra-Discal Injection	
4680	Discography 1 Level	
4690	Discography 2 Or More Levels	
4700	Anterior Cervical Fusion, 1 Level (Dowel Or Similar), Lumbar - Sacral Fusion	
4701	Occipital Cervical Fusion	
4702	Anterior Cervical Discectomy + Fusion (1 Level) Including Foramen Decompression	
4710	Anterior Cervical Fusion, 2 Or More Levels	
4711	Anterior Cervical Discectomy + Fusion (2+ Level) Including Foramen Decompression	
4720	Anterior Cervical Fusion With Internal Fixation	

SC code	Description of Surgical Procedure	Median total price (\$)
4730	Posterior C1-C2 Fusion	
4731	Posterior Fusion - C Spine (Excl C1-2)	
4740	Anterior Cervical Discectomy	
4750	Lumbar Discectomy 2 Or More Levels	
4760	Corporectomy With Fusion	
4770	Cervical Rib Excision	
4780	Trans Thoracic Fusion 1 Level	
4790	Trans Thoracic Fusion 2 Or More Levels With Or Without Instrumentation	
4800	Posterior Thoracic Fusion 1-2 Levels	
4810	Posterior Thoracic Fusion 3+ Levels With Instrumentation	
4820	Lumbar Discectomy	
4821	Anterior Lumbar Discectomy With Fusion 1 Level	
4822	Anterior Lumbar Discectomy With Fusion 2 Or More Levels	
4823	Thoracic Discectomy	
4825	Anterior Endoscopic Spinal Fusion	
4830	Anterior Lumbar Decompression / Interbody Fusion 1 Level	
4840	Posterior / Posterolateral Fusion - Lumbar -Without Instrumentation, 2+ Level	
4850	Anterior Lumbar Decompression / Interbody Fusion 2+ levels	
4860	Posterior / Posterolateral Fusion - Lumbar -Without Instrumentation, 1 Level	
4870	Posterior / Posterolateral Fusion - Lumbar -With Instrumentation 1 Level	
4880	Posterior / Posterolateral Fusion - Lumbar - With Instrumentation 2+ Levels	
4890	Posterior Interbody Fusion With Disc Implant	
4900	Corporectomy	
4910	Vertebra Excision / Replacement	
4920	Spinal Stenosis Decompression - 1 Level	9,465
4925	Spinal Stenosis Decompression - 2+ Level	15,187
4930	Decompression With Intertransverse Fusion	20,795
4940	Decompression and Instrumented Fusion 1 level	
4950	Coccygectomy	
6170	Spine - Vertebral Bodies With Cord Involvement	
	Wrist/Hand	
4200	Primary Repair Of Flexor Tendon - Hand	
4210	Secondary Repair Flexor Tendon - Wrist / Forearm	
4211	Secondary Repair Flexor Tendon - Hand	
4220	Extensor Tendon Repair - Hand	
4221	Extensor Tendon Repair - Finger	
4222	Tenolysis Extensor Tendon - Hand / Finger	
4223	Tenolysis Flexor Tendon - Finger / Palm	

SC code	Description of Surgical Procedure	Median total price (\$)
4224	Tenolysis Flexor Or Extensor Tendon - Wrist / Forearm	
4225	Repair Of Mallet Finger	
4230	Secondary Repair Extensor Tendon - Wrist / Forearm	
4239	Tendon Transfer - Palm	
4240	Tendon Transfer - Opponensplasty	
4241	Tendon Transfer - Hand	
4242	Open Tenotomy, Not Elsewhere Classified	
4243	Tenotomy - Hand / Finger (e.g. For Trigger Finger)	2,452
4244	Synovectomy - MCP Joint	
4245	Tenotomy - Hand / Finger - Bilateral	
4400	Excision Of Neuroma - Cutaneous Nerve	3,649
4470	Minor Dupuytren's Contracture Release - Unilateral	,917
4471	Minor Dupuytren's Contracture Release - Bilateral	
4480	Major Dupuytren's Contracture Release - Unilateral	5,528
4490	Volkman's Contracture	
4560	Carpal Tunnel Release	2,060
4564	Endoscopic Release Of Carpal Tunnel	
4570	Bilateral Carpal Tunnel	3,046
4582	Amputation - Finger Or Thumb, Any Joint	
5070	Arthrodesis - Wrist With Bone Graft	
5071	Arthroscopy - Wrist	
5072	Proximal Row Carpectomy removal of bones	
5080	Total Replacement - Wrist Joint	
5090	Replacement - Interphalangeal Joint	
5100	Replacement MCP Joint	
5110	Replacement Of CMC Joint	
5120	Fusion - Thumb	
5121	Fusion - MCP Joint	
5130	Fusion - IP Joint	
5131	Fusion - IP Joint With Graft	
5140	Fusion - CMC Joint To Thumb With Bone Graft	
5141	Fusion - CMC Joint To Digits With Graft	
5150	Replacement Arthroplasty In Thumb - Carpal Bones	
6010	Bone Graft - Metacarpals Or Phalanx	
	Other	
4660	Manipulation Of Joint	
4665	Neurofasciotomy	
5930	Upper Limb - Above Elbow - Plaster	
5940	Upper Limb - Below Elbow - Plaster	30

SC code	Description of Surgical Procedure	Median total price (\$)
5950	Lower Limb - Above Knee - Plaster	
5960	Lower Limb - Below Knee - Plaster	180
5965	Debridement of Joint unspecified	
6175	Removal Of Metal - Major	
6176	Excision bone tumour	
6185	Removal Of Metal - Minor	
4448	Open Muscle Biopsy	
	SECTION 7: PERIPHERAL VASCULAR SURGERY	
6200	Aorto-Iliac Endarterectomy	
6201	Aorto-Iliac Bifurcation Graft (Occlusive Disease)	
6210	Carotid Endarterectomy - Direct Closure	
6211	Carotid Endarterectomy - Patch Closure	12,888
6220	Carotid Subclavian Graft	
6225	Brachial Artery Bypass	
6230	Cervical Or Axillary Sympathectomy - Unilateral	
6232	Thoracoscopic Cervical Sympathectomy - Unilateral	
6233	Thoracoscopic Cervical Sympathectomy - Bilateral	
6240	Cross-Over Graft (Fem - Fem)	
6250	Embolectomy / Catheter Thrombectomy - Unilateral	
6260	Femoral Endarterectomy	
6270	Femoro-Popliteal Graft - Vein	
6271	Femoro-Popliteal Graft - Synthetic	
6280	Femoro-Tibial Graft - Vein	
6281	Femoro-Tibial Graft - Synthetic	
6282	Temporal Artery Biopsy	
6310	Profundoplasty	
6320	Abdominal Aortic Aneurysm Replacement - Infrarenal - With Tube Graft	
6321	Abdominal Aortic Aneurysm Replacement - Infrarenal - With Bifurcation Graft To Iliac Arteries	
6322	Abdominal Aortic Aneurysm Replacement - Infrarenal - With Bifurcation Graft To Femoral Arteries	
6323	Renal Artery Aneurysm Surgery	
6352	Femoral Artery Suturing	
6324	Abdominal Aortic Aneurysm – Infrarenal - Endoluminal Stent-Graft Repair	
6215	Carotid Sinus Denervation	

SC code	Description of Surgical Procedure	Median total price (\$)
	SECTION 8: PLASTIC	
70	Apocrinectomy - Bilateral	
271	Vermillionectomy	
6555	Revision Of Scar Of Other Site <= 7 Cms In Length (not cosmetic)	
9170	Scar Revision	
6575	Reconstruction following major head and neck surgery at Southern Cross' discretion	
6578	Reconstructions other than breast, skin, head/neck at Southern Cross' discretion	
65	Apocrinectomy – Unilateral	
	SECTION 9: ORAL AND MAXILLOFACIAL	
	Removal of Teeth	
9001	Removal Of Tooth - Forceps	
9003	Removal Of Two Or More Teeth - Surgical	1,140
9004	Full Dental Clearance	
9005	Removal Of One Tooth - Surgical	564
9006	Upper Clearance	
9007	Lower Clearance	
9008	Third Molars - 2 Upper, 2 Lower	1,490
9009	Third Molars - 2 Lower	
9011	Third Molars - 1 Upper, 1 Lower	
9012	Third Molars - 2 Upper	
9014	Third Molars - 2 Upper, 1 Lower	
	Dental-aveolar surgery	
9010	Apicectomy And Root/Fill Anterior Tooth X 1	1,281
9020	Apicectomy And Root/Fill Anterior Tooth X 2	
9030	Apicectomy And Root/Fill Posterior Tooth X 1	
9040	Apicectomy And Root/Fill Posterior Tooth X 2	
9050	Exposure Of Unerupted Tooth X 1 - For Repositioning	
9051	Exposure Of Unerupted Tooth X 1 - For Stimulation And Packing	
9060	Exposure Of Unerupted Tooth X 2 - For Repositioning	
9061	Exposure Of Unerupted Tooth X 2 - For Stimulation And Packing	
9070	Pericision (Fibrotomy) 1-2 Quadrant	
9080	Pericision (Fibrotomy) 3 Quadrant	
9090	Pericision (Fibrotomy) 4 Quadrant	

SC code	Description of Surgical Procedure	Median total price (\$)
9101	Frenectomy	
9105	Removal Of Tooth Root From Sinus	
9110	Removal Of Foreign Body From Antrum Via Alveolus	
9120	Removal Of Foreign Body From Antrum Via Caldwell Luc	
9130	Oro-Antral Fistula Closure - Buccal Sliding Flap	
9131	Oro-Antral Fistula Closure - Buccal Fat Pad	
	Maxillofacial trauma	
9180	Removal Foreign Bodies	
9190	Salivary Fistula - Duct Relocation/Repair	
9200	Open Neurolysis Of Peripheral Nerve, Not Elsewhere Classified	
9210	Nerve Suture	
9390	Removal Plates/Screws/Wires (Oral Surg)	
	Pathology	
9480	Bone Graft - Intraoral Site	
9481	Bone Graft - Remote Site	
9510	Biopsy - Incisional (Oral Surg)	485
9520	Biopsy - Excisional (Oral Surg)	530
9530	Biopsy - Needle	
9540	Cyst Enucleation - Periapical	
9550	Cyst Enucleation - Dentigerous	
9560	Cyst Enucleation - Large Intra Bony	
9570	Cyst - Soft Tissue - Excision	379
9580	Infection - Drain Abscess - Cellulitis Intra Oral	
9590	Infection - Drain Abscess - Cellulitis Extra Oral	
9610	Excision Ranula - Sub-Lingual Gland	
9620	Tumour - Benign Localised	
9630	Tumour - Benign Extensive Including Bone	
9640	Tumour - Malignant - Local Excision	
	Pre-Prosthetic surgery	
9650	Removal Hyperplasia - Localised	
9660	Removal Hyperplasia - Extensive	
9670	Sulcoplasty	
9680	Sulcoplasty - With Skin Graft	
9690	Reconstruction Of Alveolar Ridge/Grafting	
9700	Cheiloplasty	
9705	Gingival Reconstruction	
9710	Removal Torus	

SC code	Description of Surgical Procedure	Median total price (\$)
	Temporomandibular Joint	
9740	Dislocation - Closed Reduction	
9750	Internal Derangement - Conservative Management	
9760	Internal Derangement - With Splint	480
9770	Arthroplasty - Meniscal Surgery	
9780	Arthroplasty - Condylar Surgery	
9790	Arthroscopy - Investigative	
9800	Arthroscopy - With Surgery	
9810	Arthrocentesis	1,200
	SECTION 10: CARDIAC	
1197	Pericardiotomy	
1198	Pericardiocentesis	
1199	Drainage of Pericardial Effusion	
1500	Coronary Artery Bypass, single vessel (using vein or artery)	
1501	Coronary Artery Bypass, double vessel (using vein or artery)	
1502	Coronary Artery Bypass, triple vessel (using vein or artery)	
1503	Coronary Artery Bypass, quadruple vessel or more (using vein or artery)	
1505	Valve Replacement	
1506	Atrial Septal Defect (Open Closure)	
1507	Valvuloplasty	
1520	Pacemaker Surgery - Implantation (Excluding The Cost Of The Pacemaker)	
1521	Removal Of Sternal Wire	
1522	Maze Arrhythmia Surgery	
1523	Removal & Rewiring of Sternal Wire	
	CARDIAC: Affiliated Provider only section.	
	The following procedures are only covered when performed by an Affiliated Provider . (Policy limits will apply. Prior to receiving treatment your Affiliated Provider will advise the balance payable by you.)	
	Interventional Cardiology	
	Percutaneous Atrial Septal Defect Closure	
	Percutaneous Patent Foramen Ovale Closure	
	EP Studies – Cardiac Electrophysiology	
	Radio Frequency Ablation (RFA)	
	Angioplasty DES	

SC code	Description of Surgical Procedure	Median total price (\$)
	Cardiac Imaging	
	Cardiac OCT	
	Intravascular Ultrasound of cardiac vessels (IVUS)	
	CT Coronary Angiography (CTCA)	
	Fractional Flow Reserve (FFR)	
	SECTION 11: INTERVENTIONAL RADIOLOGY	
6400	Fine Needle Aspiration (Other Than Breast) Under Ultrasound	325
6401	Ultrasound Breast Cyst Aspiration (Including Fine Needle)	250
6402	Core Biopsy With Ultrasound	500
6403	CT Guided Biopsy	1,060
6404	CT Guided Drainage	
6406	Trans Perineal Prostate Biopsy	700
6407	Lumbar Chemical Sympathectomy	
6408	Chemical Sympathectomy	
6409	Intradiscal / Verteb. Inject	
6410	Fluoroscopy (in conjunction with surgical procedure)	
6411	CT Guided Injections	997
6415	Stereotactic Mammotome Breast Biopsy	1,000
6420	Brachytherapy grid guided prostate biopsy	
3546	Embolisation of Fibroid	
	SECTION 12: NEUROSURGERY	
1400	Micro Vascular Decompression Trigeminal Nerve, Trigeminal Neuralgia	
1402	Craniotomy and Excision of Tumour	
1403	Acoustic Neuroma	
1404	Translabirithine Excision Of Tumour	
1405	Craniectomy, Posterior Fossa Craniectomy	
1407	Pituitary Adenoma	
1408	Repair Of Encephalocele	
1409	Spinal Rhizolysis	
1410	Removal Of Spinal Intradural Lesion	
	SECTION 13: PROSTHESES	

SC code	Description of Surgical Procedure	Median total price (\$)
	Your refund for any eligible prostheses (as set out below) will be the maximum in the column below or the actual cost whichever is lower. This maximum includes all handling fees.	
	Additional Sundries	
0001185	Prosthesis Bone Anchor. Includes Incontinence Sling Procedure hooks, Vesica Percutaneous Coposuspension kit, MYA hook	1200
0001230	Endometrial Ablation Device	1750
0001235	Wave length fibres for prostatectomy grant. Includes laser fee for Holium laser resection, transurethral resection vapour probe.	1800
0001245	Bone Graft	7000
0001800	Mirena Interuterine	375
0001236	Wave length fibres- Urological, Includes Incision of Ureteroceis laser fibre fee	1800
0001238	Coblation Wand	400
0001082	Maze Pen	6000
	Prostheses	
0001130	Breast implants prostheses	3040
0001080	Prosthesis Heart Valve	6500
0001085	Prosthesis Ankle	9520
0001095	Wrist prosthesis	5500
0001100	Lens prosthesis (Monofocal only)	360
0001110	Shoulder Prostheses	10000
0001120	Prosthesis Elbow	12000
0001140	Spine Prostheses, Single level	12000
0001141	Spine Prostheses, Two levels	16000
0001142	Spine Prostheses, Three or more levels	21000
0001150	Other prostheses devices	1500
0001195	Prosthesis Lacrimal Tube	300
0001205	Prosthesis Arterial Graft	2500
0001210	Prosthesis Screws and Plates	2500
0001220	Prosthesis Tissue Expander	2560
0001225	TVT tension free vaginal tape	1750
0001250	Prosthesis Urological Stent	600
0001255	Prosthesis Hepatic Stent	3000
0001275	Post Mastectomy Tissue Expander	2020
0001280	Prosthesis Hip Revision	11800
0001285	Prosthesis Knee Revision	10000
0001290	Prosthesis Hip Primary	8500
0001295	Prosthesis Knee Primary	8500

SC code	Description of Surgical Procedure	Median total price (\$)
0001650	Endoluminal Stent	17000
0001655	Oesophageal Stent	3300
0001108	Intrasomal corneal ring segment - prostheses	1550
	SECTION 14: TESTS	
	Cardiac Tests	
1170000	Resting ECG	
1170800	Ambulatory NIBP	
1171200	Exercise ECG	
5528600	Echocardiogram	
5511200	Stress Echocardiogram	
5511800	Dobutamine Stress Echo/Transoesophageal Echo	
1170900	Holter Monitoring	
	Diagnostic Tests	
2380	Nasendoscopy (office based only)	
1790	Laryngoscopy (office based only)	
08008	Endometrial sampling	
0001804	Simple Urinary Flow Study	
1150000	Spirometry	
08012	Overnight Pulse Oximetry	
1150600	Pulse Oximeter / Sonography	
08013	Laboratory Sleep Study	
1220300	Sleep Study	
08014	Home Sleep Study	
08015	Spirometry - Flow Vol Loops	
08016	Lung Diffusion Study	
1150312	Lung Function	
1150307	Lung Func Test	
08017	Vascular lab testing	
1101200	Electromyography/Nerve conduction study	
1100000	Electroencephalography	
1190000	Full Urodynamic Assessment	
1122100	Automated visual field test	
4075	Retinal Photography	
1121500	Fluoroscein Angiography	
5505500	Axial Ultrasonography	
1123500	Corneal Topography	

SC code	Description of Surgical Procedure	Median total price (\$)
1120600	Electroretinogram	
1120601	Electro-oculogram	
9201500	Visual Evoked Potential	
	Affiliated Provider only section.	
	The following procedures are only covered when performed by an Affiliated Provider . (Policy limits will apply. Prior to receiving treatment your Affiliated Provider will advise the balance payable by you.)	
	Diagnostic Tests	
	Optical Coherence Tomography	
	Hiedelberg Retinal Tomography	
	Glaucoma Detection Scan	

* See the chart on the page 6 for how your refund will be calculated