الجمهورية اللبنانية
وزارة الداخلية والبلديات

المستند: ١ ـ الفقرة (٦) من المادة /٤٦/ من قانون الشرء العام رقم ٢٤٤ تاريخ ٢٠٢١/٧/٢٩.
٢ـ قانون المحاسبة العمومية الموضوع موضع التنفيذ بموجب المرسوم رقم ١٤٩٦٩ تاريخ ١٩٦٣/١٢/٣٠.
٣ـ دفتر الشروط الإدارية العام لتعهدات لوازم قوى الامن الداخلي ونظام المناقصات فيها المصدق بموجب المرسوم رقم ٢٨٦٨ تاريخ ١٩٨٠/٤/١٦.

عدد: /
تاريخ: / / ٢٠٢٥

اتفاق رضائي (إستشفاء – سجناء)

مستشفيات فئة AB

معقـود بيـن :

الدولة اللبنانية	:	**ممثلة بشخص معالي وزير الداخلية والبلديات**	**فريق أول**
مستشفى الحياة	:	**ممثلة بالسيد انطوان ملحم صابر ـ عنوانها : الشياح ـ شارع غاريوس ـ هاتف : ٠١/٥٤٦٢٠٠ ــ ٧٠/٨٢٨٤٢٤ ـ فاكس : ٠١/٢٧٧٨٠٥ ــ البريد الالكتروني p.nehme@alhayat-hospital.com info@alhayat-hospital.com**	**فريق ثان**

لما كان الفريق الأول بحاجة إلى تأمين المعالجة **للسجناء (موقوفين أو محكومين) على عاتق الإدارة .**

ولما كان الفريق الثاني تعهد بتأمين تلك المعالجة ويرغب بالتعاقد مع الفريق الأول لتقديم هذه المعالجة وفق شروط هذا الاتفاق ووفق تصنيف المديرية العامة لقوى الامن الداخلي فقد تم الاتفاق بالرضى والقبول المتبادلين بين الفريقين على ما يلي:

المـادة الأولـى: تعتبر المقدمة أعلاه جزءاً لا يتجزأ من هذا الاتفاق وتتمة له ، على أن يصار الى إعتماد التعرفة المعتمدة من قبل الإدارة المبنية على الاسعار المعتمدة والتي ستعتمد من قبل قيادة الجيش والمرفقة في الجداول ربطاً ، ويجوز تعديلها بموافقة الفريقين بقرار من المدير العام لقوى الأمن الداخلي وفقا" لما تقتضيه الحاجة.

المـادة الثانيـة: **يقصد بالعبارات المدرجة أدناه تلك المقابلة لكل منها أينما وردت في هذا الاتفاق:**

٢١ . الفريق الأول	الدولة اللبنانية ممثلة بشخص معالي وزير الداخلية والبلديات.
٢٢ . الفريق الثاني	المؤسسة الصحية .
٢٣ . الإدارة	المديرية العامة لقوى الأمن الداخلي.
٢٤ . المركز الطبي المختص	المركز الطبي الذي تقع ضمن نطاقه المؤسسة الصحية
٢٥ . المعالجة	المداواة بكافة أوجهها من طبية وجراحية بالصورة الخارجية أو

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الداخلية مع ما تتضمنه على سبيل المثال لا الحصر:

٢٥١ . الاستشفاء (حالات باردة وطارئة)

٢٥٢ . الأعمال التشخيصية: مخبرية، شعاعية، رادارية، تخطيطات...

٢٥٣ . المعاينات

٢٥٤ . العنايات الطبية المختلفة.

٢٥٥ . الأدوية.

٢٦ . المستفيد السجناء (موقوفين أو محكومين) المزودين بموافقة الإدارة الخطية.

٢٧ . موافقة الإدارة الخطية بيان أبحاث، بطاقة دخول، موافقة برقية....

٢٨ . المستندات المثبتة للدين فواتير كلفة المعالجة والمستندات الثبوتية المرفقة بها.

٢٩ . ممثل المؤسسة الصحية هو الشخص المخول بالتوقيع وإبرام العقود عن الفريق الثاني وفقاً للنظام الداخلي الأساسي.

المادة الثالثة: <u>المستندات الثبوتية المرفقة بالاتفاق والتي تثبت توفر المؤهلات الفنية والمهنية والملاءة المالية بمقدميها</u>:

٣١ . المؤهلات الفنية والمهنية:

٣١١ . تصريح / تعهد (مرفق ربطاً) موقع من المفوض بالتوقيع عن المؤسسة الصحية وممهورًا بالخاتم الرسمي بشأن التعاقد يرفق به:

أ . مستند تصريح النزاهة (مرفق ربطاً) موقّعًا من المفوَّض بالتوقيع وممهورًا بالخاتم الرسمي.

ب. سجل عدلي وإخراج قيد إفرادي أو صورة هوية للمفوض بالتوقيع لا يعود تاريخيهما لأكثر من ثلاثة أشهر.

ج . الاذاعة التجارية (صورة طبق الاصل).

د. إفادة شاملة صادرة عن السجل التجاري تبين المؤسسين والأعضاء والمساهمين أو الشركاء المفوضين بالتوقيع ، المدير ، رأس المال ، نشاطها والوقوعات الجارية.

٣١٢ . نسخة عن:

أ . ترخيص بفتح واستثمار مستشفى.

ب . إجازة فتح واستثمار (مركز أشعة، مختبر طبي، صيدلية).

٣٢ . الملاءة المالية:

321- شهادة تسجيل شركة أو مؤسسة لدى وزارة المالية – مديرية الواردات (صورة طبق الاصل).

322- براءة ذمة من الصندوق الوطني للضمان الإجتماعي " شاملة أو صالحة للإشتراك في المناقصات " صالحة بتاريخ جلسة التلزيم صادرة عن المركز الكائنة ضمن نطاق صلاحيته المؤسسة الصحية تفيد بأنها قد سددت جميع إشتراكاتها . يجب أن تكون

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مسجلة في الصندوق وترفض كل إفادة يذكر عليها عبارة "شركة أو مؤسسة غير مسجلة" (صورة طبق الاصل).

323- شهادة تسجيل المؤسسة الصحية في مديرية الضريبة على القيمة المضافة إذا كانت خاضعة لها ، أو شهادة عدم التسجيل اذا لم تكون خاضعة ، وفي هذه الحالة يلتزم الملتزم بسعره وان أصبح مسجلاً في فترة التنفيذ .

324- إفادة صادرة عن البلدية التي يقع المركز الرئيسي للمؤسسة الصحية ، تفيد أنها سددت كامل الرسوم البلدية المتوجبة عليها ، صادرة عن العام الذي تجري فيه جلسة التلزيم .

325- تصريح من العارض يبيّن فيه صاحب الحق الاقتصادي حتى آخر درجة ملكية بحسب النموذج م١٨ الصادر عن وزارة المالية. (كل شخص طبيعي يملك او يسيطر فعليا في المحصلة النهائية على النشاط الذي يمارسه العارض، بصورة مباشرة او غير مباشرة، سواء كان هذا العارض شخص طبيعي او معنوي).

326- بطاقة الهوية او جواز السفر لصاحب (أصحاب) الحق الاقتصادي.

327- سجل عدلي لصاحب (أصحاب) الحق الاقتصادي لا يعود تاريخه لأكثر من ثلاثة أشهر من تاريخ جلسة فض العروض.

328- إفادتا عدم إفلاس وعدم تصفية قضائية صادرتين عن المحكمة الكائنة ضمن نطاق صلاحيتهما المؤسسة التجارية تثبت أن هذه الاخيرة ليست في حالة الافلاس والتصفية القضائية على ألا يعود تاريخهما لأكثر من سنة من تاريخ توقيع هذا الاتفاق.

٣٣ . **ضمان حسن التنفيذ:**

يتعهد الفريق الثاني بتنفيذ بنود هذا الاتفاق ولهذه الغاية يقدم خلال مهلة خمسة عشرة يوماً من تاريخ تبليغه تصديق الاتفاق ضمان حسن التنفيذ بقيمة ٠،٢٠ % واحد بالمئة من القيمة التقديرية للملف المحددة في المادة التاسعة ، إما نقدياً يدفع الى صندوق الخزينة أو إلى صندوق سلطة التعاقد ، وإما بموجب كتاب ضمان مصرفي غير قابل للرجوع عنه ، صادر عن مصرف مقبول من مصرف لبنان يبين أنه قابل للدفع غب الطلب . يعاد هذا المستند عند إنتهاء مفاعيل الاتفاقية.

٣٤ . **<u>الجداول الواردة أدناه مع ملحقاتها موقعة من الفريق الثاني ومرفقة بهذا الاتفاق وتتضمن:</u>**

٣٤١ . تعرفة التقديمات الطبية المعتمدة من قبل الادارة المبنية على الاسعار المعتمدة والتي ستعتمد من قبل قيادة الجيش.

٣٥ . خطيطة للجناح المخصص للسجناء يبين فيه مكان إقامة السجناء وعناصر الحراسة والمراحيض على أن تنطبق مواصفات البناء على الشروط التقنية والأمنية التي تحددها الإدارة .

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المادة الرابعة: **في تنفيذ الاتفاق:**

يتعهد الفريق الثاني بما يلي:

٤١ . استقبال ومعالجة المستفيد المزود بموافقة الإدارة الخطية وإبلاغ المركز الطبي المختص فوراً وبواسطة الفاكس عن المستفيدين الذين يقصدون قسم الطوارئ للمعالجة المزودين بالبطاقة الصحية أو المسلكية فقط وعلى المركز المذكور المبادرة فورياً لتأمين موافقة الإدارة الخطية للفريق الثاني وفقاً للأصول.

٤٢ . الالتزام الحرفي بمضمون موافقة الإدارة الخطية والطلب من المستفيد تدوين أي تعديل أو إضافة في موافقة الإدارة الخطية من المركز الطبي المختص مسبقاً وذلك فيما يتعلق بـ:

٤٢١ . تمديد مدة الاستشفاء أو إضافة معالجة أو تعديلها.

٤٢٢ . في الحالات الطارئة والتي تكون فيها حالة المستفيد الصحية أو حياته بخطر على الفريق الثاني تجاوز طلب التعديل الخطي المسبق والمباشرة بالمعالجة اللازمة فوراً على أن يتم التعديل أو الإضافة لاحقاً.

٤٢٣ . تأمين البدائل واللوازم والمغروسات الطبية التي يحتاجها المستفيد أثناء الاستشفاء وفقاً لأسعار منصة وزارة الصحة للمغروسات الطبية ، أما للوازم والبدائل غير المغروسة وفقاً للسعر المحدد من قبل الإدارة على أن تدوّن بشكل واضح على الموافقة من قبل المركز الطبي .

٤٢٤ . طلب الموافقة الاستثنائية المسبقة من قبل المركز الطبي المختص قبل إعطاء أدوية غذائية.

٤٢٥ . أخذ موافقة المركز الطبي المختص على وضع المستفيد في:

٤٢٥١ . غرفة العزل.

٤٢٥٢ . غرفة العناية الفائقة أو القلبية.

ضمن مهلة ٢٤ ساعة من إجرائه على أن يتم تبرير من قبل الطبيب المعالج بموجب تقرير مفصل يصدق من قبل المركز الطبي المختص ويضم الى فاتورة المعالجة.

٤٢٦ . التقيد بالرموز المعتمدة من قبل الإدارة فيما خص الأعمال الطبية والمخبرية والشعاعية والمدرجة في الجداول المرفقة.

٤٢٧ . فصل الأعمال الطبية والجراحية المقطوعة عن الأعمال الطبية والجراحية غير المقطوعة وذلك في إعداد المستندات المثبته للدين.

٤٢٨ . وضع المستفيد في الدرجة الأعلى في حال لم يتوفر سرير شاغر في الدرجة المخصصة له دون الحاجة إلى تعديل درجة الاستشفاء.

٤٣ . عدم استيفاء أي مبلغ من المستفيد المزود بموافقة الإدارة الخطية ما لم يقترن ذلك بأمر واضح من الإدارة، حينها يتم استيفاء المبلغ المفروض عند انتهاء المعالجة وخروج المستفيد نهائياً وعدم

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أخذ توقيعه على أي مستند خلافاً للاتفاق.

٤٤ . تسليم المستندات المثبتة للدين الى لجنة إستلام خدمات الطبابة والإستشفاء أو الى المركز الطبي المختص وذلك بموجب جداول إجمالية وفقاً للنماذج (المرفقة ربطاً)، بالنسبة لحالة الإستشفاء (دخول) والتحال الدموي وجلسات العلاج الكيميائي يتم تسليم الفواتير من قبل المستشفى الى لجنة إستلام خدمات الطبابة والاستشفاء ، أما بالنسبة للمعالجات الخارجية أو الطوارىء تسليم الفواتير من قبل المستشفى الى المركز الطبي الواقع ضمن نطاقها ، وذلك بمدة أقصاها ثلاثة أشهر من تاريخ المعالجة **وتعتبر بحكم الساقطة بمرور الزمن كل فاتورة يتجاوز تاريخ تسليمها ثلاثة أشهر إعتباراً من تاريخ خروج المريض** ، أما فيما خص تلك العائدة لمعالجة المستفيدين الذين يخرجون من المستشفى في النصف الثاني من كانون الأول فتسلم قبل الخامس من كانون الثاني ٢٠٢٦، بالإضافة الى ذلك أن المستندات المثبتة للدين العائدة للمستفيدين الذين يستمر علاجهم داخل المستشفى لما بعد السنة التعاقدية ٢٠٢٥ فتسلم خلال عشرة أيام من تاريخ الخروج .

- بالنسبة للحالات المرضية التي تستدعي البقاء في المستشفى لفترات طويلة تتجاوز ثلاثة أشهر (إعادة تأهيل) فيتم تسليم المستندات المثبتة للدين كل ثلاثة أشهر إعتباراً من تاريخ دخول المستشفى على أن يتم إعادة فتح ملف طبي جديد لإستكمال المعالجة .

٤٥ . تسليم المركز الطبي المختص وبناءً لطلب هذا الأخير الصور الشعاعية اللازمة ليتمكن من التحقق من صحة تركيب اللوازم والبدائل الطبية.

٤٦ . تأمين المعالجة والعمليات الجراحية على يد طبيب اختصاصي أو أكثر ولا يقبل إجراؤها من قبل أطباء متمرنين ويشترط بطبيب البنج أن يكون مجازاً ويدون اسمه على سجلات البنج، يستثنى من ذلك المؤسسات الصحية الجامعية حيث تطبق الأعراف الطبية الأكاديمية المعمول بها عالمياً والتي تسمح إجراء العمليات تحت إشراف ومسؤولية الأستاذ الطبيب المعالج المباشرة.

٤٧ . عدم الاعتراض على نقل المستفيد إلى مؤسسة صحية أخرى عندما تقرر الإدارة أو المركز الطبي المختص ذلك والسماح للضباط الأطباء والأطباء المراقبين المزودين بتكليف خطي من الإدارة أو مصلحة الصحة بالإطلاع على حالة المستفيد الصحية والخدمات الطبية المقدمة إليه والإطلاع على كافة السجلات والملفات الممسوكة لديه وتسليمهم نسخة عنها إذا إقتضى الأمر وتقديم التسهيلات اللازمة لهذا الشأن.

٤٨. إعتماد خطة طوارىء مكتوبة تتعلق بدور المستشفى في مواجهة الجائحات المحتملة وتدابير حماية العاملين الصحيين فيها وفقاً لأحكام التعاميم الصادرة عن وزارة الصحة العامة .

٤٩ . تنظيم ومسك وحفظ ملف طبي خاص لكل مستفيد يعالج لديه وفق الأصول القانونية والطبية وأن يدون عليه بانتظام:

٤٩١. حالة المستفيد عند الدخول.

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٤٩٢. كافة مراحل تطور مرضه.

٤٩٣. الفحوصات التي أجريت له ونتائجها وآراء الأطباء المعاينين والمعالجين.

٤٩٤. كافة المعالجات التي نالها المستفيد.

٤٩٥. أية معلومات طبية يراها ضرورية.

٤٩٦. استمارة التبليغ عن الأمراض الخبيثة الخاضعة للبرنامج الوطني للأمراض الانتقالية .

٤٩٧. ملخص خروج واضح.

٤٩٨ . إجراء كافة الفحوصات والمعاينات والصور الشعاعية غير المتوفرة في المستشفى بصورة إلزامية وعلى نفقته وإضافة القيمة على فاتورة المعالجة وفقاً للنبذة (ز) من البند ٥١٦ أدناه.

٤٩٩ . أتعاب الأطباء على حده ، على أن تحدد بدلات هذه الأتعاب وفق الأسعار الواردة في هذا الإتفاق وتدرج في الفاتورة.

المادة الخامسة: إعداد المستندات المثبتة للدين ووضعها في طريق الصرف.

من أجل استلام الإدارة خدمات الطبابة والمعالجة المنفذة من الفريق الثاني على هذا الأخير الالتزام بمدرجات هذا الاتفاق وإعداد المستندات المثبتة للدين وتقديمها وفقاً لما يلي:

٥١ . تنظيم فاتورة معالجة يرفق بها المستندات التالية:

٥١١ . موافقة الإدارة الخطية مع كافة تعديلاتها في حال وجودها.

٥١٢ . نسخة عن ملخص الخروج.

٥١٣ . نسختين من استمارة تبليغ عن الأمراض الخبيثة الخاصة للبرنامج الوطني للأمراض الانتقالية .

٥١٤ . صورة عن البطاقة الصحية لأفراد العائلات .

٥١٥ . جدول بكافة اللوازم الطبية المستعملة أثناء المعالجة على أن تكون هوية اللوازم الطبية مفصلة بصورة واضحة (proforma) وتدل عليها دون أي التباس ، ويضم إلى كافة اللوازم فاتورة الشراء من مصدرها أو صورة عنها تحمل اسم المستفيد صاحب العلاقة مع لصق Label لكل مستلزم أستعمل أثناء المعالجة .

٥١٥١ . يحتسب سعر اللوازم والبدائل والمغروسات الطبية وفقاً لأسعار منصة وزارة الصحة العامة أما اللوازم والبدائل الطبية غير المغروسة فيحدد سعرها بناءً لموافقة الإدارة وتدون على التعهد أو ال (proforma) المقدمة من المستشفى وتوقع من المركز الطبي المختص .

٥١٦ . كلفة المعالجة وذلك وفقاً للأسعار المعتمدة في الجداول المدرجة في البند ٣٤ آنفاً باستثناء ما يلي:

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أ ـ يدخل ضمن البدل المقطوع:

١ . **لأجرة السرير في اليوم:** اللوازم الطبية والأدوية وفقاً لما يلي:

□ **اللوازم الطبية:**المطهرات المحلية على سبيل المثال ANTISEPTIQUES
LOCAUX THERMOMETRE, SERINGUE, MONTAGE, CANULE

مواد التضميد على سبيل المثال GANTS STERIL OU NON , PANSEMET..ETC

□ **الأدوية** الملينات LAXATIFS ORAUX والمسكنات البسيطة ANTALGIQUES .

٢ . **لغرفة العزل:** جميع اللوازم الطبية والأدوية المبينة في النبذة ١ أعلاه.

٣ . **لغرفة العناية الفائقة:** كافة معدات التخطيط والمراقبة واللوازم العائدة لها MONITORING وجميع اللوازم الطبية والأدوية المبينة في النبذة ١ أعلاه بالإضافة الى الأعمال الطبية التالية:

CBCD, Coag. Fact., NaHCO3, Creat, CO2, CPK, Rx Thorax, ECG, O2, Hummid., Nebuliz.

٤ . **لغرفة الولادة:** جميع اللوازم الطبية ومعدات التخطيط والمراقبة ومواد التخدير والأدوية التي تستعمل بداخلها، منها على سبيل المثال لا الحصر:

PRODUITS DESINFECTANTS: MERCRYL, BETADINE.GANTS DISPOSABLES, COTON, COMPRESSES PETITES, COUCHES, FEMME MECHES COVER BOOT,ETC... .

٥ . **لكلفة سرير المولود حديثاً:** جميع اللوازم الطبية المذكورة في النبذة ١ أعلاه ومواد التغذية العادية على سبيل المثال CAROUBA, GLUCOLIN, GELLOPECTOSE, CARIL SIMPLA, PICORIZ, LAIT, ETC...

٦ . **لأجرة الحاضنة:** كافة اللوازم الطبية المستعملة وأجور التحاليل المخبرية والتصوير الشعاعي وجميع التقديمات التي تدخل في أجرة السرير في العناية الفائقة.

٧ . **لغرفة العمليات:** اللوازم الطبية والأدوية التالية:

قطن . شاش . مواد تطهير وتعقيم . أدوية التحضير للعملية . أدوية ولوازم التخدير والإنعاش . جميع معدات التخطيط والمراقبة . أوكسيجين . أجرة الطبيب المساعد . خيوط الجراحة بإستثناء الخيوط التي هي دون (٤/صفر) يحدد سعرها كلوازم طبية من قبل الإدارة .

ب . لا يحتسب البدل المقطوع لأجرة غرفة الطوارئ في حال أدخل المستفيد إلى المستشفى، أما الأعمال التي تجري ضمنها فتحتسب وفق التعرفة.

ج . لا تحتسب أجرة سرير المستفيد في قسم الإستشفاء أثناء الإقامة في غرفة العناية الفائقة.

د. . لا يحتسب فرق الدرجة الأعلى في حال لم يتوفر سرير شاغر في الدرجة المخصصة للمستفيد.

هـ . تحتسب أجرة السرير في غرفة العزل كإقامة عادية في حال لم تقترن الأسباب الموجبة

مستشفى الهيئة
انطوان صابر
٢٠٢٥

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للعزل بموافقة رئيس المركز الطبي خلال ٢٤ ساعة كحد اقصى.

و . تحتسب قيمة الأعمال التشخيصية غير المتوفرة لدى الفريق الثاني وفق الأسعار المعتمدة والعائدة لتصنيف المؤسسة الصحية حيث أجريت الأعمال.

المادة السادسة: **<u>إستلام وتصفية ودفع النفقة:</u>**

٦١ . تسلم المستندات المثبتة للدين وفقاً للفقرة ٤٤ من هذا العقد.

٦٢ . فور تسلم الإدارة المستندات المثبتة للدين تقوم لجنة استلام خدمات الطبابة والاستشفاء أو المركز الطبي بتدقيق تلك المستندات والتثبت من مطابقة المعالجة مع مضمون موافقة الإدارة الخطية وتعديلاتها والموافقات الاستثنائية اللاحقة وتطابق أسعار تلك المستندات مع الجداول موضوع البند ٣٤ وتدقيقها وإجراء الخصومات التالية:

٦٢١ . شطب قيمة المعالجات المخالفة لمضمون موافقة الإدارة الخطية وتعديلاتها.

٦٢٢ . حسم المبالغ التي تزيد عن الأسعار موضوع البند ٣٤ أعلاه.

٦٢٣ . شطب ثمن اللوازم الطبية المخالفة لمضمون الفقرة ٥١٥ أعلاه .

٦٢٤ . شطب كلفة المعالجة المخالفة لمضمون الفقرة ٥١٦ أعلاه.

٦٢٥ . شطب كافة النفقات التي ليس لها علاقة بالعلاج كالهاتف والضيافة والسرير الإضافي والممرضة الخاصة والطعام الإضافي وعلى الفريق الثاني استيفاؤها مباشرة من المستفيد عند الخروج وذلك بموجب إيصال على أن يرد ذكرها مفصلة في الفاتورة مع الإشارة إلى أنها سددت من صاحب العلاقة.

٦٢٦ . عند وجود أقسام مرخصة إنما غير مصنفة بعد يعتمد في الأسعار التصنيف الأدنى

٦٢٧ . يستوفى بدل المعالجة التي لم يرد ذكره في الجداول المعتمدة موضوع البند ٣٤ أعلاه بموجب جدول مستقل يضم إلى فاتورة المعالجة ويحتسب بالمقارنة مع عمل مماثل له من حيث الكلفة والوقت، على أنه يبقى للإدارة الحق في الموافقة على إحتساب البدل أو تعديله.

٦٣ . وضع المستندات المثبتة للدين في طريق الصرف وتصفيتها وفقاً للأصول واستصدار أمر دفع بالليرة اللبنانية .

المادة السابعة: **<u>الإجراءات والغرامات المفروضة عند مخالفة أي من مدرجات هذا الاتفاق:</u>**

٧١ . **<u>أحكام جزائية</u>** :

٧١١ . تعتبر المحاكم اللبنانية المختصة هي الجهة الصالحة للبت في الخلافات الناجمة عن تطبيق بنود هذه الإتفاقية .

٧١٢ . يمكن للفريق الأول توجيه كتاب تنبيه أو إنذار الى الفريق الثاني أو كل طبيب متعاقد معه في حال ثبت لديه إرتكاب أي منهما خطأً يستوجب ذلك وتودع نسخة عن

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هذا الكتاب النقابة المعنية (نقابة المستشفيات – نقابة الأطباء – ...)

٧١٣ . في حال إخلال الفريق الثاني بأحد احكام هذه الإتفاقية او إرتكابه خطأ إدارياً أو طبياً يحق للفريق الأول حسم المبالغ المتوجبة من مستحقات الفريق الثاني ، أو تعليق العمل بالإتفاقية لمدة يعود تقديرها للفريق الأول ، او فسخ الإتفاقية بصورة نهائية مع الإحتفاظ بحقه بالملاحقة القانونية على أن يبرّر التدبير أعلاه بكتاب يرسل الى الفريق الثاني مع حفظ حق هذا الأخير بالإعتراض وفقاً للأصول القانونية .

٧٢ . <u>إنتهاء مفاعيل الإتفاقية</u> :

٧٢١ . تنتهي مفاعيل هذه الإتفاقية في الحالات التالية :

- عند إنتهاء مدتها .
- بناء على قرار من الفريق الأول في حال إرتكب الفريق الثاني خطأ إدارياً أو طبياً جسيماً .
- عند إحالة الفريق الثاني الى القضاء إثر خطأ جسيم ناجم عن تنفيذ الإتفاقية ، يحق للفريق الأول تعليق العمل بهذه الإتفاقية طيلة مدة المحاكمة .

٧٢٢ . يعتبر الفريق الثاني متمنعاً عن إستقبال المرضى عند التصريح بذلك خطياً أو شفهياً أو عند إلزام الفريق الأول بالموافقة المسبقة أو بأي شرط من الشروط التي تعدّل الآلية المعنية في هذا السياق أو عند تكرار شكوى المستفيدين من عدم إستقبال التحويل والتحقق مادياً على الأرض من قبل الفريق الأول من توافر وشغور الأسرّة عملاً بشروط هذه الإتفاقية .

٧٣ . <u>فسخ الاتفاق ومصادرة ضمان حسن التنفيذ لمصلحة الخزينة في الحالات التالية:</u>

٧٣١ . عدم تنفيذ الفقرة ٤٢٢ و٤٢٣.

٧٣٢ . عدم تنفيذ البنود ٤١، ٤٣، ٤٦، ٤٧، ٤٨، ٤٩ .

٧٣٣ . تقديم أي من المستندات الثبوتية المدرجة في المادتين الثالثة والسادسة من هذا الاتفاق يتبين لاحقاً بأنها غير صحيحة.

٧٤ . <u>فسخ الاتفاق</u>

٧٤١ . عند الإفلاس أو التصفية القضائية أو إلغاء ترخيص الاستثمار.

٧٤٢ . عند عدم تنفيذ البند ٣٣.

٧٥ . تغريمه بنسبة ٥٠% من قيمة فاتورة المعالجة المدفوعة للمؤسسة الصحية التي تمت فيها معالجة المستفيد في حال عدم تنفيذ البند ٤١ بالإضافة إلى ملاحقته جزائياً إذا تعرض المستفيد لمضاعفات صحية من جراء نقله للمعالجة في مؤسسة طبية أخرى وفقاً لما تنص عليه القوانين الطبية النافذة في كل حين.

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٧٦ . عند مخالفة البند ٤٤ آنفاً يتم تأجيل وضع المستندات المثبتة للدين طريق الصرف حتى نهاية العام التعاقدي.

٧٧ . تغريمه بنسبة ٥% من قيمة فاتورة المعالجة الصافية للدفع عند مخالفة الفقرة ٤٢٦ أعلاه وبنسبة ١٠% عند التكرار.

٧٨. شطب اللوازم والبدائل الطبية وكافة الأتعاب المرافقة لها عند مخالفة البند ٤٥.

٧٩ . إعادة الفاتورة من لجنة إستلام خدمات الطبابة والإستشفاء أو المركز الطبي المختص إلى المؤسسة الصحية بموجب لائحة إرسال وفق الأصول لاستكمال و/أو تصحيح المستندات المثبتة للدين وفقاً لما نصت عليه المادة الخامسة أعلاه في حال وجود نواقص أو مغايرات.

المادة الثامنة: **<u>مدة الالتزام بهذا الاتفاق:</u>**

– يعمل بهذا الاتفاقية بعد تصديقها من المرجع الصالح وإبلاغها الى الفريق الثاني ولغاية ٢٠٢٥/١٢/٣١ .

– إذا تعذر على الإدارة تلزيم الخدمات الطبية للعام ٢٠٢٦ قبل نهاية العام ٢٠٢٥ يمدد مفعول هذه الإتفاقية خلال العام ٢٠٢٦ بناءً لقرار المرجع الصالح لمرة واحدة أو أكثر ، وذلك لفترة أقصاها السنة الواحدة ، بنفس الشروط والأسعار شرط إبلاغ الفريق الثاني قرار أو قرارات التمديد قبل إنتهاء مدة الإلتزام أو تمديده .

المادة التاسعة: **<u>قيمة الإتفاق</u>**

إن هذا الإتفاق هو غب الطلب ضمن قيمة تقديرية وسقفها المالي **يبلغ:** /٣٥،٠٠٠،٠٠٠،٠٠٠/**ل.ل. خمسة وثلاثون مليار ليرة لبنانية** سنوياً قابلة للزيادة أو النقصان من قبل الادارة تبعاً للخدمات الطبية والحالات المرضية التي تحيلها الإدارة على الفريق الثاني والتي لا يمكن تحديدها مسبقاً ويعتمد في إجراء المحاسبة الأسعار المحددة وفقاً لما هو مدرج في البند ٣٤ من المادة الثالثة من هذا الإتفاق.

بيروت في / /٢٠٢٥
عدد /
تأشير مراقب عقد النفقات

بيروت في / /٢٠٢٥
<u>فريق أول</u>
وزير الداخلية والبلديات

مستشفى الحياة
الدكتور انطوان ملحم صابر

بيروت في : ٢٣ / ٦ / ٢٠٢٥
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انطوان ملحم صابر

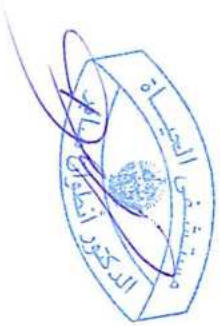
ملحق رقم واحد: أسعار الدرجة الخاصة (أسعار مقطوعة) في المستشفيات المتعاقدة المصنفة (A/B)

CODE		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
		AUDITORY SYSTEM								
1	69200	Removal foreign body from external auditory canal (separate procedure)	5	0	1	1,925,000	0	0	4,476,000	6,401,000
2	69420	Myringotomy including aspiration and/or eustachian tube inflation (separate procedure)	15	0	1	5,775,000	0	3,850,000	9,772,000	19,397,000
3	69433	Tympanostomy (requiring insertion of ventilating tube)	20	12	1	7,700,000	4,620,000	3,850,000	12,858,000	29,028,000
4	69501	Mastoidectomy: simple	75	25	2	28,875,000	9,625,000	3,850,000	36,199,000	78,549,000
5	69511	Mastoidectomy: radical, any procedure	90	30	4	34,650,000	11,550,000	3,850,000	60,277,000	110,327,000
6	69620	Myringoplasty, uncomplicated	60	20	2	23,100,000	7,700,000	3,850,000	28,146,000	62,796,000
7	69631	Tympanoplasty without mastoidectomy (including canalplasty, atticotomy and/or middle ear surgery), initial or revision: any method	75	25	2	28,875,000	9,625,000	3,850,000	37,372,000	79,722,000
8	69635	Tympanoplasty with antrotomy or mastoidectomy (including canalplasty, atticotomy, middle ear surgery, and/or tympanic membrane repair): with or without ossicular chain reconstruction, any method	110	36	3	42,350,000	13,860,000	3,850,000	57,438,000	117,498,000
9	69660	Stapedectomy or stapedotomy with reestablishment of ossicular continuity, with or without use of foreign material	80	26	2	30,800,000	10,010,000	3,850,000	41,277,000	85,937,000
10	69801	Labyrinthotomy, with or without cryosurgery or other nonexcisional destructive procedures or tack procedure: transcanal	50	18	2	19,250,000	6,930,000	3,850,000	28,882,000	58,912,000
11	69905	Labyrinthectomy: transcanal	75	25	2	28,875,000	9,625,000	3,850,000	36,718,000	79,068,000
		CARDIO SYSTEM								
12	33200	Insertion of permanent pacemaker with epicardial electrode(s): open procedure	75	33	1	28,875,000	12,705,000	3,850,000	47,010,000	92,440,000
13	33210	Insertion or replacement of temporary transvenous single chamber cardiac electrode, or pacemaker catheter (separate procedure)	25	0	1	9,625,000	0	3,850,000	25,470,000	38,945,000
14	33245	Implantation of automatic implantable cardioverter-defibrillator pads with or without	85	0	1	32,725,000	0	3,850,000	36,963,000	73,538,000
15	33247	Insertion or replacement of implantable cardioverter-defibrillator lead(s) by other than thoracotomy	65	0	1	25,025,000	0	3,850,000	24,034,000	52,909,000
16	33250	Operative ablation of supraventricular arrhythmogenic focus or pathway (eg, Wolff-Parkinson-White, A-V node re-entry), tract(s), and or focus (foci)	150	67	7	57,750,000	25,795,000	3,850,000	203,772,000	291,167,000
17	33411	Replacement, aortic valve: with or without aortic annulus enlargement, noncoronary cusp	130	65	7	50,050,000	25,025,000	3,850,000	290,652,000	369,577,000
18	33416	Resection or incision of subvalvular aortic stenosis	175	87	5	67,375,000	33,495,000	3,850,000	225,415,000	330,135,000
19	33420	Valvotomy, mitral valve (commisurotomy): closed	145	72	7	55,825,000	27,720,000	3,850,000	94,795,000	182,190,000
20	33425	Valvuloplasty, mitral valve, any method	150	75	7	57,750,000	28,875,000	3,850,000	243,673,000	334,148,000
21	33430	Replacement, mitral valve	125	65	7	48,125,000	25,025,000	3,850,000	310,798,000	387,798,000
22	33452	Valvotomy, tricuspid valve	95	47	7	36,575,000	18,095,000	3,850,000	198,628,000	257,148,000
23	33460	Valvuloplasty or valvectomy, tricuspid valve, with or without insertion of tricuspid ring	125	65	7	48,125,000	25,025,000	3,850,000	218,580,000	295,580,000
24	33468	Tricuspid valve replacement or repositioning and plication for Ebstein anomaly	130	65	7	50,050,000	25,025,000	3,850,000	218,611,000	297,536,000
25	33472	Valvotomy, pulmonary valve (commisurotomy) closed or open	95	47	7	36,575,000	18,095,000	3,850,000	202,854,000	261,374,000
26	33478	Pulmonary artery patch for supraventricular stenosis	140	70	6	53,900,000	26,950,000	3,850,000	205,536,000	290,236,000
27	33480	Double valve procedure	250	125	6	96,250,000	48,125,000	3,850,000	311,841,000	460,066,000

CODE		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
28	33641	Repair atrial septal defect, secundum, with or without patch	100	50	7	38,500,000	19,250,000	3,850,000	193,518,000	255,118,000
29	33647	Repair of atrial septal defect and ventricular septal defect, with direct or patch closure	200	100	6	77,000,000	38,500,000	3,850,000	208,582,000	327,932,000
30	33648	Correction of cor triatriatum	190	95	6	73,150,000	36,575,000	3,850,000	223,848,000	337,423,000
31	33650	Bicaval - bipulmonary bypass procedure	270	135	6	103,950,000	51,975,000	3,850,000	213,594,000	373,369,000
32	33649	Repair of tricuspid atresia	270	135	6	103,950,000	51,975,000	3,850,000	233,512,000	393,287,000
33	33670	Repair of complete atrioventricular canal, with prosthetic valve	250	125	6	96,250,000	48,125,000	3,850,000	247,894,000	396,119,000
34	33684	Closure of ventricular septal defect, with pulmonary valvotomy or infundibular resection, with or without patch	200	100	6	77,000,000	38,500,000	3,850,000	240,195,000	359,545,000
35	33690	Banding of pulmonary artery	100	50	6	38,500,000	19,250,000	3,850,000	206,452,000	268,052,000
36	33697	Complete repair of tetralogy of Fallot: with or without closure of previous shunt	250	125	6	96,250,000	48,125,000	3,850,000	261,031,000	409,256,000
37	33710	Repair sinus of Valsalva fistula, with/ without repair of ventricular septal defect	150	75	6	57,750,000	28,875,000	3,850,000	216,444,000	306,919,000
38	33720	Repair sinus of Valsalva aneurysm	90	45	6	34,650,000	17,325,000	3,850,000	187,944,000	243,769,000
39	33730	Complete repair of total anomalous venous return	200	100	6	77,000,000	38,500,000	3,850,000	240,195,000	359,545,000
40	33735	Atrial septectomy or septostomy any method	120	60	6	46,200,000	23,100,000	3,850,000	237,247,000	310,397,000
41	33750	Shunt: systemic or vena cava to pulmonary artery, with or without graft	120	60	6	46,200,000	23,100,000	3,850,000	215,953,000	289,103,000
42	33774	Repair of transposition of the great arteries, any method	300	150	6	115,500,000	57,750,000	3,850,000	271,645,000	448,745,000
43	33784	Total repair of double outlet ventricle	350	175	6	134,750,000	67,375,000	3,850,000	260,998,000	466,973,000
44	33785	Total repair of single ventricle (double inlet ventricle)	350	175	6	134,750,000	67,375,000	3,850,000	260,998,000	466,973,000
45	33786	Total repair, truncus arteriosus (Rastelli type operation)	200	100	6	77,000,000	38,500,000	3,850,000	224,176,000	343,526,000
46	33788	Reimplantation of anomalous pulmonary artery	125	65	6	48,125,000	25,025,000	3,850,000	204,552,000	281,552,000
47	33800	Aortic suspension (aortopexy) for tracheal decompression (eg, for tracheomalacia) (separate procedure)	100	50	5	38,500,000	19,250,000	3,850,000	199,174,000	260,774,000
48	33820	Patent ductus arteriosus: ligation and/or division, any age	120	60	7	46,200,000	23,100,000	3,850,000	87,997,000	161,147,000
49	33840	Excision or repair of coarctation of aorta, with or without associated patent ductus arteriosus, any type	180	90	5	69,300,000	34,650,000	3,850,000	190,558,000	298,358,000
50	33870	Transverse arch graft, with or without cardiopulmonary by-pass	210	105	5	80,850,000	40,425,000	3,850,000	175,489,000	300,614,000
51	33875	Descending thoracic aorta graft, with or without cardiopulmonary by-pass	175	90	5	67,375,000	34,650,000	3,850,000	187,216,000	293,091,000
52	33877	Repair of thoracoabdominal aortic aneurysm with graft	230	115	5	88,550,000	44,275,000	3,850,000	170,968,000	307,643,000
53	33916	Pulmonary embolectomy or endarterectomy with or without embolectomy	125	65	6	48,125,000	25,025,000	3,850,000	183,258,000	260,258,000
54	34001	Arterial embolectomy or thrombectomy, with or without catheter: carotid, subclavian, innominate, axillary, brachial, radial, or ulnar artery (separate procedure)	85	34	2	32,725,000	13,090,000	3,850,000	36,636,000	86,301,000
55	34203	Arterial embolectomy or thrombectomy, with or without catheter: popliteal-tibio-peroneal, femoropopliteal, or aortoiliac artery (separate procedure)	80	30	3	30,800,000	11,550,000	3,850,000	46,960,000	93,160,000
56	34451	Venous thrombectomy, direct or with catheter: vena cava, iliac, or femoropopliteal vein, by abdominal and leg incision (separate procedure)	90	35	3	34,650,000	13,475,000	3,850,000	45,978,000	97,953,000
57	34471	Venous thrombectomy, direct or with catheter: axillary and subclavian vein, by neck or arm incision (separate procedure)	65	25	1	25,025,000	9,625,000	3,850,000	25,935,000	64,435,000
58	34501	Valvuloplasty, femoral vein (separate procedure)	120	40	3	46,200,000	15,400,000	3,850,000	50,958,000	116,408,000
59	34510	Venous valve transposition, any vein donor (separate procedure)	120	40	3	46,200,000	15,400,000	3,850,000	50,958,000	116,408,000
60	34530	Saphenopopliteal vein anastomosis (separate procedure)	120	40	3	46,200,000	15,400,000	3,850,000	50,958,000	116,408,000

CODE		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
61	35001	Direct repair of aneurysm, false aneurysm, or excision and graft insertion, with or without patch graft for aneurysm, ruptured aneurysm, or occlusive disease: carotid, subclavian, innominate, vertebral, or axillary- brachial artery	130	50	5	50,050,000	19,250,000	3,850,000	158,011,000	231,161,000
62	35045	Direct repair of aneurysm, false aneurysm, or excision and graft insertion, with or without patch graft: for aneurysm, false aneurysm, ruptured aneurysm or occlusive disease, radial or ulnar artery	75	30	1	28,875,000	11,550,000	3,850,000	29,914,000	74,189,000
63	35231	Repair blood vessel, with graft: neck, extremity, hand, finger	80	26	1	30,800,000	10,010,000	3,850,000	32,305,000	76,965,000
64	35241	Repair blood vessel, with graft: intrathoracic, with bypass	150	75	5	57,750,000	28,875,000	3,850,000	177,618,000	268,093,000
65	35246	Repair blood vessel, with graft: intrathoracic without bypass	125	55	5	48,125,000	21,175,000	3,850,000	113,736,000	186,886,000
66	35301	Thromboendarterectomy, with or without patch graft: carotid, vertebral, subclavian, innominate	125	50	5	48,125,000	19,250,000	3,850,000	119,437,000	190,662,000
67	35331	Thromboendarterectomy, with or without patch graft: abdominal aorta, and/or major branches, iliac -	175	70	5	67,375,000	26,950,000	3,850,000	167,157,000	265,332,000
68	35381	Thromboendarterectomy, with or without patch graft: axillary, brachial, common femoral, deep (profunda), femoral and/or popliteal, and/or tibioperoneal	100	35	5	38,500,000	13,475,000	3,850,000	125,607,000	181,432,000
69	35526	Bypass graft, with vein or prosthesis: carotid, subclavian , vertebral, axillary,	125	44	5	48,125,000	16,940,000	3,850,000	125,688,000	194,603,000
70	35531	Bypass graft, with vein or prosthesis: aorto-splenic, renal, iliac, celiac, or mesenteric	165	66	5	63,525,000	25,410,000	3,850,000	166,677,000	259,462,000
71	36010	Introduction of catheter, superior or inferior vena cava (separate procedure)	15	0	1	5,775,000	0	3,850,000	10,455,000	20,080,000
72	36215	Selective catheter placement, arterial system: any site (separate procedure)	35	15	1	13,475,000	5,775,000	3,850,000	16,647,000	39,747,000
73	36260	Insertion of implantable intra-arterial infusion pump (eg, for chemotherapy of liver) (separate procedure)	60	20	1	23,100,000	7,700,000	3,850,000	22,806,000	57,456,000
74	36420	Placement of peripheral venous catheter by cutdown (outside O.R.) (separate procedure)	10	0	1	3,850,000	0	3,850,000	8,097,000	15,797,000
75	36488	Placement of central venous catheter (subclavian, jugular, or other vein): percutaneous or cutdown separate procedure)	15	0	1	5,775,000	0	3,850,000	10,455,000	20,080,000
76	36510	Catheterization of umbilical vein (separate procedure)	10	0	1	3,850,000	0	3,850,000	8,097,000	15,797,000
77	36530	Percutaneous insertion or revision of implantable intravenous infusion pump chamber or Broviac catheter (separate procedure)	35	15	1	13,475,000	5,775,000	3,850,000	16,647,000	39,747,000
78	36821	Arterio-venous anastomosis, direct, any site	60	20	1	23,100,000	7,700,000	3,850,000	22,806,000	57,456,000
79	36825	Creation of arteriovenous fistula: any graft	70	23	1	26,950,000	8,855,000	3,850,000	27,556,000	67,211,000
80	37205	Transcatheter placement of an intravascular stent, (non coronary vessel), percutaneous or open: initial vessel	55	20	1	21,175,000	7,700,000	3,850,000	20,413,000	53,138,000
81	93548	Combined left heart catheterization, selective coronary angiography, one or more coronary arteries, selective left ventricular angiography, with aortic root aortography	50	0	1	19,250,000	0	3,850,000	27,982,000	51,082,000
82	93549	Combined right and left heart catheterization, selective coronary angiography, one or more coronary arteries, and selective ventricular angiography	60	0	1	23,100,000	0	3,850,000	29,128,000	56,078,000
83	92982	Percutaneous transluminal angioplasty: single vessel	85	0	2	32,725,000	0	3,850,000	44,089,000	80,664,000
84	33510	Coronary artery bypass, single coronary graft, vein or artery, (includes obtaining graft)	170	85	5	65,450,000	32,725,000	3,850,000	243,351,000	345,376,000
85	33511	Coronary artery bypass, double coronary graft, vein or artery, (includes obtaining grafts), with or without	190	95	5	73,150,000	36,575,000	3,850,000	245,563,000	359,138,000

CODE		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
86	33512	Coronary artery bypass, triple coronary graft, vein or artery, (includes obtaining grafts), with or without endarterectomy	200	100	5	77,000,000	38,500,000	3,850,000	249,249,000	368,599,000



CODE		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
		DIGESTIVE SYSTEM								
87	42505	Plastic repair of salivary duct, sialodochoplasty: secondary or complicated	40	16	1	15,400,000	6,160,000	3,850,000	13,338,000	38,748,000
88	42821	Tosillectomy and adenoidectomy, including treatment of postoperative complications: any age	35	16	1	13,475,000	6,160,000	3,850,000	17,745,000	41,230,000
89	42830	Adenoidectomy (separate procedure): primary or secondary	20	13	1	7,700,000	5,005,000	3,850,000	15,451,000	32,006,000
90	43200	Esophagoscopy, rigid or flexible fiberoptic: diagnostic (separate procedure)	15	0	0	5,775,000	0	0	2,211,000	7,986,000
91	43205	Esophagoscopy, rigid or flexible fiberoptic: therapeutic	30	15	0	11,550,000	5,775,000	0	11,104,000	28,429,000
92	43260	Endoscopic retrograde cholangiopancreatography (ERCP) diagnostic (separate procedure)	40	17	1	15,400,000	6,545,000	3,850,000	14,583,000	40,378,000
93	43300	Esophagoplasty (plastic repair or reconstruction), cervical approach: without repair of tracheoesophageal fistula	60	20	5	23,100,000	7,700,000	3,850,000	53,262,000	87,912,000
94	43305	Esophagoplasty (plastic repair or reconstruction), cervical approach: with repair of tracheoesophageal fistula	100	40	7	38,500,000	15,400,000	3,850,000	78,957,000	136,707,000
95	43340	Esophagojejunostomy (without total gastrectomy)	100	34	5	38,500,000	13,090,000	3,850,000	67,086,000	122,526,000
96	43450	Dilation of esophagus, by unguided sound or bougie, single or multiple passes (separate procedure)	15	0	1	5,775,000	0	0	11,782,000	17,557,000
97	43500	Gastrotomy: with exploration or removal of foreign body	70	24	5	26,950,000	9,240,000	3,850,000	59,584,000	99,624,000
98	43620	Gastrectomy, total: with repair by intestinal transplant, without lymphadenectomy	160	56	8	61,600,000	21,560,000	3,850,000	151,852,000	238,862,000
99	43761	Repositioning of the gastric feeding tube through the duodenum for enteric nutrition (separate procedure)	15	0	1	5,775,000	0	0	10,471,000	16,246,000
100	43825	Gastrojejunostomy with vagotomy, any type	115	40	7	44,275,000	15,400,000	3,850,000	84,345,000	147,870,000
101	43830	Gastrostomy	70	24	1	26,950,000	9,240,000	3,850,000	25,327,000	65,367,000
102	43860	Revision of gastrojejunostomy with reconstruction, with or without vagotomy	120	42	5	46,200,000	16,170,000	3,850,000	79,077,000	145,297,000
103	44020	Enterotomy, small bowel other than duodenum: for exploration, biopsy, or foreign body removal (separate procedure)	75	27	4	28,875,000	10,395,000	3,850,000	56,745,000	99,865,000
104	44120	Enterectomy: with anastomosis	95	34	6	36,575,000	13,090,000	3,850,000	77,985,000	131,500,000
105	44146	Colectomy, partial: with colpoproctostomy (low pelvic anastomosis), with or without colostomy	130	46	5	50,050,000	17,710,000	3,850,000	84,252,000	155,862,000
106	44150	Colectomy, total, abdominal, without proctectomy: with continent ileostomy or ileoproctostomy	135	44	6	51,975,000	16,940,000	3,850,000	90,367,000	163,132,000
107	44153	Colectomy, total or subtotal, with proctectomy: with rectal mucosectomy, ileoanal or coloanal anastomosis, creation of reservoir (S or J), with or without loop ileostomy or colostomy	180	63	10	69,300,000	24,255,000	3,850,000	130,537,000	227,942,000
108	44345	Reconstruction of colostomy (separate procedure)	70	25	5	26,950,000	9,625,000	3,850,000	62,304,000	102,729,000
109	44388	Fiberoptic colonoscopy through colostomy: diagnostic or therapeutic (separate procedure)	15	0	1	5,775,000	0	0	6,933,000	12,708,000
110	44625	Closure of enterostomy, large or small intestine: with or without resection and	80	28	5	30,800,000	10,780,000	3,850,000	66,856,000	112,286,000
111	44950	Appendectomy, any method (non-incidental procedure)	60	21	3	23,100,000	8,085,000	3,850,000	39,688,000	74,723,000
112	45000	Transrectal drainage of pelvic abscess (separate procedure)	25	14	1	9,625,000	5,390,000	3,850,000	14,206,000	33,071,000
113	45020	Incision and drainage of deep supralevator, pelvirectal, or retrorectal abscess	25	14	1	9,625,000	5,390,000	3,850,000	14,206,000	33,071,000
114	45110	Proctectomy: complete, combined abdominoperineal, with colostomy, one or two stages	150	53	7	57,750,000	20,405,000	3,850,000	101,494,000	183,499,000
115	45505	Proctoplasty: for prolapse of mucous membrane or stenosis	50	18	1	19,250,000	6,930,000	3,850,000	20,676,000	50,706,000

CODE		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
116	45905	Dilation of anal or rectal sphincter (separate procedure) under anesthesia	15	12	1	5,775,000	4,620,000	3,850,000	10,864,000	25,109,000
117	46040	Incision and drainage of ischiorectal, perirectal or perianal abscess (separate procedure)	35	16	1	13,475,000	6,160,000	3,850,000	14,370,000	37,855,000
118	46060	Incision and drainage of ischiorectal or intramural abscess, with fistulectomy, submuscular	40	16	1	15,400,000	6,160,000	3,850,000	18,318,000	43,728,000
119	46080	Sphincterotomy, anal (separate procedure)	30	15	1	11,550,000	5,775,000	3,850,000	12,388,000	33,563,000
120	46200	Fissurectomy, with or without sphincterotomy	35	16	1	13,475,000	6,160,000	3,850,000	15,681,000	39,166,000
121	46262	Hemorrhoidectomy, internal and external: with fistulectomy and/or fissurectomy	50	18	2	19,250,000	6,930,000	3,850,000	29,985,000	60,015,000
122	46270	Surgical treatment of anal fistula: fistulotomy / fistulectomy (separate procedure)	45	17	1	17,325,000	6,545,000	3,850,000	20,988,000	48,708,000
123	46750	Sphincteroplasty, anal, for incontinence or prolapse	65	22	3	25,025,000	8,470,000	3,850,000	39,147,000	76,492,000
124	46760	Sphincteroplasty, anal, for incontinence: muscle transplant	150	50	10	57,750,000	19,250,000	3,850,000	112,519,000	193,369,000
125	46937	Cryosurgery of rectal tumor: benign (separate procedure)	20	13	1	7,700,000	5,005,000	3,850,000	14,910,000	31,465,000
126	46938	Cryosurgery of rectal tumor: malignant (separate procedure)	30	15	1	11,550,000	5,775,000	3,850,000	13,894,000	35,069,000
127	46940	Curettage or cauterization of anal fissure, including dilation of anal sphincter (separate procedure)	20	13	1	7,700,000	5,005,000	3,850,000	12,093,000	28,648,000
128	46945	Ligation of internal hemorrhoids (separate procedure)	20	13	1	7,700,000	5,005,000	3,850,000	12,978,000	29,533,000
129	47000	Biopsy of liver, percutaneous needle (separate procedure)	15	0	1	5,775,000	0	3,850,000	14,271,000	23,896,000
130	47010	Hepatotomy for drainage of abscess or cyst, one or two stages	65	23	5	25,025,000	8,855,000	3,850,000	60,910,000	98,640,000
131	47130	Hepatectomy: total right lobectomy	200	80	6	77,000,000	30,800,000	3,850,000	99,852,000	211,502,000
132	47425	Choledochotomy or choledochostomy with exploration, drainage, or removal of calculus, with or without cholecystotomy: with or without transduodenal sphincterotomy or sphincteroplasty	110	39	7	42,350,000	15,015,000	3,850,000	105,885,000	167,100,000
133	47480	Cholecystotomy or cholecystostomy with exploration, drainage, or removal of calculus (separate procedure)	55	20	3	21,175,000	7,700,000	3,850,000	47,206,000	79,931,000
134	47600	Cholecystectomy: with or without cholangiography, any method	80	28	3	30,800,000	10,780,000	3,850,000	49,167,000	94,597,000
135	47610	Cholecystectomy: with exploration of common duct	110	39	7	42,350,000	15,015,000	3,850,000	91,945,000	153,160,000
136	48100	Biopsy of pancreas (separate procedure)	70	25	3	26,950,000	9,625,000	3,850,000	43,291,000	83,716,000
137	48145	Pancreatectomy, distal subtotal, with or without splenectomy: with or without pancreaticojejunostomy	130	46	7	50,050,000	17,710,000	3,850,000	105,622,000	177,232,000
138	48180	Pancreaticojejunostomy, side-to-side anastomosis (Puestow type operation)	120	42	7	46,200,000	16,170,000	3,850,000	118,662,000	184,882,000
139	49000	Exploratory laparatomy, exploratory celiotomy, with or without biopsy (separate	80	28	5	30,800,000	10,780,000	3,850,000	63,057,000	108,487,000
140	49002	Reopening of recent laparatomy (separate procedure)	70	25	4	26,950,000	9,625,000	3,850,000	47,589,000	88,014,000
141	49020	Drainage of peritoneal abscess or localizd peritonitis, transabdominal (separate procedure)	70	25	7	26,950,000	9,625,000	3,850,000	86,262,000	126,687,000
142	49180	Biopsy, abdominal or retroperitoneal mass, percutaneous needle	15	0	1	5,775,000	0	0	13,158,000	18,933,000
143	49496	Repair initial inguinal hernia, under age 5 years, with or without hydrocelectomy	55	20	1	21,175,000	7,700,000	3,850,000	21,211,000	53,936,000
144	49507	Repair inguinal hernia, age 5 years or over, initial, recurrent, or sliding, with or without prosthesis, with or without hydrocelectomy	70	24	1	26,950,000	9,240,000	3,850,000	25,416,000	65,456,000
145	49550	Repair femoral, umbilical, or lumbar hernia, any age, initial	55	18	1	21,175,000	6,930,000	3,850,000	21,430,000	53,385,000
146	49553	Repair femoral, umbilical, or lumbar hernia, any age, recurrent, with or without prosthesis	70	24	1	26,950,000	9,240,000	3,850,000	26,965,000	67,005,000
147	49560	Repair incisional (abdominal) hernia, reducible, with or without prosthesis: initial separate	70	24	1	26,950,000	9,240,000	3,850,000	30,820,000	70,860,000

CODE		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
148	45378	Colonoscopy, fiberoptic, beyond splenic flexure: diagnostic	40	16	1	15,400,000	6,160,000	0	9,309,000	30,869,000
149	43235	Upper gastrointestinal endoscopy (esophagus, stomach, and either the duodenum and/or jejunum as appropriate): diagnostic (separate procedure)	25	0	1	9,625,000	0	0	7,342,000	16,967,000

CODE		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
FEMALE GENITAL SYSTEM										
150	56605	Biopsy of vulva or perineum (separate procedure)	10	0	1	3,850,000	0	3,850,000	9,439,000	17,139,000
151	57000	Colpotomy: with exploration or drainage of pelvic abscess	20	12	3	7,700,000	4,620,000	3,850,000	22,357,000	38,527,000
152	57110	Vaginectomy, complete removal of vagina	45	17	1	17,325,000	6,545,000	3,850,000	30,783,000	58,503,000
153	57135	Excision of vaginal cyst or tumor	20	12	1	7,700,000	4,620,000	3,850,000	14,026,000	30,196,000
154	57200	Colporrhaphy: suture of injury of vagina (non obstetrical)	30	14	1	11,550,000	5,390,000	3,850,000	16,909,000	37,699,000
155	57240	Anterior colporrhaphy, repair of cystocele with or without repair of urethrocele (separate	40	16	1	15,400,000	6,160,000	3,850,000	17,892,000	43,302,000
156	57250	Posterior colporrhaphy, repair of rectocele with or without perineorrhaphy (separate procedure)	35	15	1	13,475,000	5,775,000	3,850,000	15,516,000	38,616,000
157	57265	Combined anteroposterior colporrhaphy: with or without enterocele repair (separate procedure)	55	19	1	21,175,000	7,315,000	3,850,000	26,851,000	59,191,000
158	57280	Colpopexy, abdominal approach	55	19	1	21,175,000	7,315,000	3,850,000	24,297,000	56,637,000
159	57282	Sacrospinous ligament fixation for prolapse of vagina following hysterectomy (separate procedure)	55	19	1	21,175,000	7,315,000	3,850,000	24,297,000	56,637,000
160	57310	Closure of urethrovaginal fistula: any method	50	18	2	19,250,000	6,930,000	3,850,000	26,905,000	56,935,000
161	57452	Colposcopy (vaginoscopy): (separate procedure)	10	0	1	3,850,000	0	0	9,309,000	13,159,000
162	57454	Colposcopy: with biopsies, or biopsy of the cervix (separate procedure)	10	0	1	3,850,000	0	0	10,848,000	14,698,000
163	57460	Colposcopy: with loop electrosurgical excision(s) of the cervix (LEEP) (separate	20	12	1	7,700,000	4,620,000	3,850,000	14,059,000	30,229,000
164	57500	Cervix, biopsy, single or multiple, or local excision of lesion, with or without fulguration (separate procedure)	10	0	1	3,850,000	0	0	10,029,000	13,879,000
165	57505	Endocervical curettage (not done as part of a dilation and curettage) (separate procedure)	10	0	1	3,850,000	0	3,850,000	10,422,000	18,122,000
166	57510	Cauterization of cervix: electro, thermal, cryo, or laser ablation (separate procedure)	15	0	1	5,775,000	0	0	10,570,000	16,345,000
167	57700	Cerclage of uterine cervix, non obstetrical	25	13	1	9,625,000	5,005,000	3,850,000	15,435,000	33,915,000
168	58150	Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(ies)	90	30	6	34,650,000	11,550,000	3,850,000	79,278,000	129,328,000
169	58200	Total abdominal hysterectomy, including partial vaginectomy, with para-aortic and pelvic lymph node sampling, with or without removal of tube(s), with or without removal of ovary(ies)	130	43	6	50,050,000	16,555,000	3,850,000	121,102,000	191,557,000
170	58240	Pelvic exenteration for gynecologic malignancy (total abdominal hysterectomy, removal of bladder, ureteral transplantations and/or abdominoperineal resection of rectum and colon and colostomy	210	73	10	80,850,000	28,105,000	3,850,000	158,088,000	270,893,000
171	58267	Vaginal hysterectomy: with colpo-urethrocystopexy (Marshall-Marchetti-Krantz or Pereyra type, with/without endoscopic control)	100	33	6	38,500,000	12,705,000	3,850,000	76,821,000	131,876,000
172	58275	Vaginal hysterectomy, with total or partial colpectomy	110	36	6	42,350,000	13,860,000	3,850,000	81,571,000	141,631,000
173	58520	Hysterorrhaphy, repair or ruptured uterus (non obstetrical)	55	19	4	21,175,000	7,315,000	3,850,000	50,422,000	82,762,000
174	58700	Salpingectomy, complete or partial, unilateral or bilateral (separate procedure)	40	16	1	15,400,000	6,160,000	3,850,000	20,709,000	46,119,000
175	58800	Drainage of ovarian cyst(s), unilateral or bilateral: vaginal approach	25	13	1	9,625,000	5,005,000	3,850,000	16,401,000	34,881,000

CODE		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
176	58805	Drainage of ovarian cyst(s), unilateral or bilateral: abdominal approach	40	16	1	15,400,000	6,160,000	3,850,000	23,428,000	48,838,000
177	58900	Biopsy of ovary, unilateral or bilateral	45	18	1	17,325,000	6,930,000	3,850,000	19,840,000	47,945,000
178	59300	Episiotomy or vaginal repair only, by other than attending physician	15	12	1	5,775,000	4,620,000	3,850,000	9,783,000	24,028,000
179	59320	Cerclage of cervix, during pregnancy: vaginal	20	12	1	7,700,000	4,620,000	3,850,000	12,192,000	28,362,000
180	59325	Cerclage of cervix , during pregnancy: abdominal	40	16	1	15,400,000	6,160,000	3,850,000	21,855,000	47,265,000
181	59100	Hysteretomy, abdominal (eg, for removal of hydatiform mole, abortion)	60	20	4	23,100,000	7,700,000	3,850,000	50,701,000	85,351,000
182	59151	Laparoscopic treatment of ectopic pregnancy: with or without salpingectomy and/or oophorectomy	60	20	1	23,100,000	7,700,000	3,850,000	30,177,000	64,827,000
183	59350	Hysterorrhaphy of ruptured uterus	45	17	4	17,325,000	6,545,000	3,850,000	49,308,000	77,028,000
184	59410	Vaginal delivery only (with or without episiotomy and/or forceps) including postpartum care	60	0	1	23,100,000	0	3,850,000	19,846,000	46,796,000
185	59515	Cesarean delivery including postpartum care, with or without hysterectomy	80	26	4	30,800,000	10,010,000	3,850,000	57,438,000	102,098,000
186	59840	Induced abortion, by dilation and curettage	20	12	1	7,700,000	4,620,000	3,850,000	12,912,000	29,082,000
		MALE GENITAL SYSTEM								
187	54150	Circumcision, using clamp or other device: newborn	10	0	1	3,850,000	0	0	10,618,000	14,468,000
188	54161	Circumcision, surgical excision other than clamp, device, or dorsal slit: except newborn	25	13	1	9,625,000	5,005,000	3,850,000	15,255,000	33,735,000
189	54322	One stage distal hypospadias repair (with or without chordee or circumcision): with simple meatal advancement (eg, Magpi, V-flap) or with urethroplasty by local skin flaps	80	26	1	30,800,000	10,010,000	3,850,000	26,572,000	71,232,000
190	54500	Biopsy of testis: needle (separate procedure)	10	0	1	3,850,000	0	3,850,000	10,455,000	18,155,000
191	54520	Orchiectomy: simple (including subcapsular), with or without testicular prosthesis, scrotal or	40	16	1	15,400,000	6,160,000	3,850,000	19,857,000	45,267,000
192	54530	Orchiectomy, radical, for tumor: any approach	60	20	3	23,100,000	7,700,000	3,850,000	42,997,000	77,647,000
193	54640	Orchiopexy, any type, with or without hernia repair	60	20	1	23,100,000	7,700,000	3,850,000	22,314,000	56,964,000
194	54700	Incision and drainage of epididymis, testis, and/or scrotal space (eg, abscess or hematoma)	25	13	1	9,625,000	5,005,000	3,850,000	13,551,000	32,031,000
195	55040	Excision of hydrocele: unilateral	35	15	1	13,475,000	5,775,000	3,850,000	18,301,000	41,401,000
196	55700	Biopsy, prostate: needle or punch, single or multiple, any approach	15	0	1	5,775,000	0	3,850,000	13,894,000	23,519,000
197	55705	Biopsy, prostate: incisional, any approach	30	14	1	11,550,000	5,390,000	3,850,000	17,302,000	38,092,000
198	55720	Prostatotomy, external drainage of prostatic abscess, any approach	40	16	1	15,400,000	6,160,000	3,850,000	20,185,000	45,595,000
199	55801	Prostatectomy, perineal, subtotal (including control of postoperative bleeding, vasectomy, meatotomy, urethralcalibration and/or dilation, and internal urethrotomy)	90	30	6	34,650,000	11,550,000	3,850,000	83,209,000	133,259,000
		INTEGUMENTARY SYSTEM								
200	11770	Excision of pilonidal cyst or sinus	40	15	1	15,400,000	5,775,000	3,850,000	19,890,000	44,915,000
201	19020	Mastotomy with exploration and drainage of abscess, deep	20	12	1	7,700,000	4,620,000	3,850,000	11,077,000	27,247,000
202	19100	Biopsy of breast: needle aspiration (separate procedure)	10	0	1	3,850,000	0	0	11,896,000	15,746,000
203	19140	Mastectomy for gynecomastia	40	15	1	15,400,000	5,775,000	3,850,000	20,217,000	45,242,000
204	19160	Mastectomy, partial, for excision of cyst or tumor	40	15	1	15,400,000	5,775,000	3,850,000	22,216,000	47,241,000
205	19162	Mastectomy, partial: with axillary lymphadenectomy	100	33	1	38,500,000	12,705,000	3,850,000	47,998,000	103,053,000
206	19180	Mastectomy, simple, complete	60	20	1	23,100,000	7,700,000	3,850,000	28,932,000	63,582,000
207	19200	Mastectomy, radical, including pectoral muscles, axillary lymph nodes	100	33	5	38,500,000	12,705,000	3,850,000	80,746,000	135,801,000

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		MUSCULOSKELETAL SYSTEM								
208	20900	Bone graft, any donor area	35	14	1	13,475,000	5,390,000	3,850,000	19,350,000	42,065,000
209	20920	Fascia lata graft	35	14	1	13,475,000	5,390,000	3,850,000	16,926,000	39,641,000
210	21245	Reconstruction of mandible or maxilla, subperiosteal implant	75	27	2	28,875,000	10,395,000	3,850,000	34,719,000	77,839,000
211	21315	Closed treatment, nasal bone or septum fracture: with or without stabilization	20	12	1	7,700,000	4,620,000	3,850,000	18,448,000	34,618,000
212	21338	Open treatment of nasoethmoid fracture: with or without external fixation	50	18	1	19,250,000	6,930,000	3,850,000	20,938,000	50,968,000
213	21445	Open treatment of mandibular or maxillary alveolar ridge fracture (separate procedure)	35	16	2	13,475,000	6,160,000	3,850,000	40,977,000	64,462,000
214	21462	Open treatment of closed or open mandibular fracture: with or without interdental fixation	60	21	2	23,100,000	8,085,000	3,850,000	35,490,000	70,525,000
215	21465	Open treatment of mandibular condylar fracture	65	22	2	25,025,000	8,470,000	3,850,000	37,864,000	75,209,000
216	21470	Open treatment of complicated mandibular fracture by multiple surgical approaches, including internal fixation, interdental fixation, and/or wiring of dentures or splints	100	35	3	38,500,000	13,475,000	3,850,000	49,974,000	105,799,000
217	21805	Open treatment of rib fracture: without fixation, each	15	12	1	5,775,000	4,620,000	3,850,000	11,847,000	26,092,000
218	21810	Treatment of rib fracture: requiring external fixation ("flail chest")	35	15	1	13,475,000	5,775,000	3,850,000	16,761,000	39,861,000
219	22315	Closed treatment of vertebral body fracture and/or dislocation, with or without anesthesia, by manipulation or traction, each	50	18	2	19,250,000	6,930,000	3,850,000	29,265,000	59,295,000
220	22505	Spine manipulation requiring anesthesia, any region	15	12	2	5,775,000	4,620,000	3,850,000	20,698,000	34,943,000
221	22554	Arthrodesis, anterior interbody technique: cervical below C2, with bone graft (separate procedure)	120	40	8	46,200,000	15,400,000	3,850,000	105,105,000	170,555,000
222	22558	Arthrodesis, anterior interbody technique: lumbar, with bone graft (separate procedure)	150	50	8	57,750,000	19,250,000	3,850,000	127,578,000	208,428,000
223	22585	Arthrodesis, anterior or anterolateral, each additional interspace (list separately in addition to single level arthrodesis)	40	16	8	15,400,000	6,160,000	3,850,000	98,913,000	124,323,000
224	22610	Arthrodesis, posterior or posterolateral technique, with local bone or bone allograft and/or internal fixation: thoracic or lumbar (separate procedure)	135	45	8	51,975,000	17,325,000	3,850,000	102,073,000	175,223,000
225	23450	Capsulorrhaphy for recurrent dislocation of shoulder, anterior or posterior, any method, any type	85	28	3	32,725,000	10,780,000	3,850,000	57,820,000	105,175,000
226	23505	Closed treatment of clavicular fracture: with manipulation	20	12	1	7,700,000	4,620,000	3,850,000	12,585,000	28,755,000
227	23515	Open treatment of clavicular fracture, with or without internal or external skeletal fixation	50	18	1	19,250,000	6,930,000	3,850,000	22,642,000	52,672,000
228	23575	Closed treatment of scapular fracture: with manipulation, with or without skeletal traction (with or without shoulder joint involvement)	20	12	1	7,700,000	4,620,000	3,850,000	12,912,000	29,082,000
229	23605	Closed treatment of proximal humeral (surgical or anatomical neck) fracture: with manipulation, with or without skeletal traction	20	12	1	7,700,000	4,620,000	3,850,000	15,925,000	32,095,000
230	23660	Open treatment of acute shoulder dislocation	40	16	1	15,400,000	6,160,000	3,850,000	57,204,000	82,614,000
231	23665	Closed treatment of shoulder dislocation, with fracture of greater tuberosity, with manipulation	20	12	1	7,700,000	4,620,000	3,850,000	13,830,000	30,000,000
232	23700	Manipulation under anesthesia, shoulder joint, including application of fixation apparatus (dislocation excluded)	20	12	1	7,700,000	4,620,000	3,850,000	13,830,000	30,000,000
233	24102	Arthrotomy, elbow: for synovectomy	50	18	1	19,250,000	6,930,000	3,850,000	21,265,000	51,295,000

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234	24505	Closed treatment of humeral shaft fracture: with manipulation, with or without skeletal traction	35	15	1	13,475,000	5,775,000	3,850,000	20,266,000	43,366,000
235	24516	Open treatment of humeral shaft fracture, with insertion of intramedullary implant, with or without cerclage and/or locking screws	75	25	4	28,875,000	9,625,000	3,850,000	71,847,000	114,197,000

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236	24600	Treatment of closed elbow dislocation	35	15	1	13,475,000	5,775,000	3,850,000	20,233,000	43,333,000
237	24615	Open treatment of acute or chronic elbow dislocation	50	18	1	19,250,000	6,930,000	3,850,000	21,265,000	51,295,000
238	24655	Closed treatment of radial head or neck fracture: with manipulation	35	15	1	13,475,000	5,775,000	3,850,000	16,483,000	39,583,000
239	24675	Closed treatment of ulnar fracture, proximal end (olecranon process): with manipulation	35	15	1	13,475,000	5,775,000	3,850,000	16,483,000	39,583,000
240	25105	Arthrotomy, wrist joint: for synovectomy	45	15	1	17,325,000	5,775,000	3,850,000	21,381,000	48,331,000
241	25505	Closed treatment of radial shaft fracture: with manipulation	30	14	1	11,550,000	5,390,000	3,850,000	16,417,000	37,207,000
242	25515	Open treatment of radial shaft fracture: with/without internal or external fixation	60	20	1	23,100,000	7,700,000	3,850,000	35,746,000	70,396,000
243	25535	Closed treatment of ulnar shaft fracture: with manipulation	25	13	1	9,625,000	5,005,000	3,850,000	16,401,000	34,881,000
244	25545	Open treatment of ulnar shaft fracture: with/without internal or external fixation	60	20	1	23,100,000	7,700,000	3,850,000	74,730,000	109,380,000
245	25565	Closed treatment of radial and ulnar shaft fractures: with manipulation	35	15	1	13,475,000	5,775,000	3,850,000	16,827,000	39,927,000
246	25574	Open treatment of radial and ulnar shaft fractures, with internal or external fixation of	35	15	1	13,475,000	5,775,000	3,850,000	22,200,000	45,300,000
247	25575	Open treatment of radial and ulnar shaft fractures, with internal or external fixation: of radius and ulna	70	23	3	26,950,000	8,855,000	3,850,000	50,236,000	89,891,000
248	25620	Open treatment of distal radial fracture, or epiphyseal separation, with or without fracture of ulnar styloid, with or without internal or external fixation	60	20	3	23,100,000	7,700,000	3,850,000	38,902,000	73,552,000
249	25670	Open treatment of radiocarpal or intercarpal dislocation, one or more bones	45	15	1	17,325,000	5,775,000	3,850,000	21,414,000	48,364,000
250	25675	Closed treatment of distal radioulnar dislocation with manipulation	25	13	1	9,625,000	5,005,000	3,850,000	13,387,000	31,867,000
251	25800	Arthrodesis, wrist joint (including radiocarpal and/or ulnocarpal fusion): without bone graft (separate procedure)	70	23	1	26,950,000	8,855,000	3,850,000	24,444,000	64,099,000
252	26025	Drainage of palmar bursa	30	14	1	11,550,000	5,390,000	3,850,000	15,697,000	36,487,000
253	26040	Fasciotomy, palmar, for Dupuytren's contracture: closed (subcutaneous)	35	15	1	13,475,000	5,775,000	3,850,000	19,120,000	42,220,000
254	26100	Arthrotomy for synovial biopsy: carpometacarpal or metacarpophalangeal or interphalangeal joint	25	12	1	9,625,000	4,620,000	3,850,000	20,856,000	38,951,000
255	26499	Correction claw finger, other methods	60	20	1	23,100,000	7,700,000	3,850,000	23,068,000	57,718,000
256	26605	Closed tretament of metacarpal fracture, single: with manipulation, each bone	25	0	1	9,625,000	0	3,850,000	13,650,000	27,125,000
257	26615	Open treatment of metacarpal fracture, single, with or without internal or external fixation, each bone	40	13	1	15,400,000	5,005,000	3,850,000	17,662,000	41,917,000
258	26735	Open treatment of phalangeal shaft fracture, proximal or middle phalanx, finger or thumb, with or without internal or external fixation, each	40	13	1	15,400,000	5,005,000	3,850,000	21,823,000	46,078,000
259	26785	Open treatment of interphalangeal joint dislocation, with or without internal or external fixation, single	30	12	1	11,550,000	4,620,000	3,850,000	18,186,000	38,206,000
260	27125	Partial hip replacement, prosthesis (eg, femoral stem prosthesis, bipolar arthroplasty)	105	35	6	40,425,000	13,475,000	3,850,000	89,298,000	147,048,000
261	27130	Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip replacement), with or without autograft or allograft	150	50	6	57,750,000	19,250,000	3,850,000	109,663,000	190,513,000
262	27235	Percutaneous skeletal fixation of femoral fracture, proximal end, neck, undisplaced, mildly displaced or impacted fracture	70	23	1	26,950,000	8,855,000	3,850,000	30,930,000	70,585,000
263	27236	Open treatment of femoral fracture, proximal end, neck, internal fixation or prosthetic replacement (direct fracture exposure)	95	32	6	36,575,000	12,320,000	3,850,000	117,460,000	170,205,000

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264	27240	Closed treatment of intertrochanteric, pertrochanteric, or subtrochanteric femoral fracture, with manipulation: with or without skin or skeletal traction	50	16	3	19,250,000	6,160,000	3,850,000	34,086,000	63,346,000

CODE		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
265	27244	Open treatment of intertrochanteric, pertrochanteric, or subtrochanteric femoral fracture: with plate/screw type implant, with or without cerclage	100	33	6	38,500,000	12,705,000	3,850,000	104,896,000	159,951,000
266	27245	Open treatment of intertrochanteric, pertrochanteric or subtrochanteric femoral fracture: with intramedullary implant, with or without interlocking screws and/or cerclage	100	33	1	38,500,000	12,705,000	3,850,000	46,228,000	101,283,000
267	27250	Closed treatment of hip dislocation, traumatic	30	12	3	11,550,000	4,620,000	3,850,000	29,172,000	49,192,000
268	27253	Open treatment of hip dislocation, traumatic, without internal fixation	70	23	1	26,950,000	8,855,000	3,850,000	26,344,000	65,999,000
269	27332	Arthrotomy, knee, for meniscectomy: medial OR lateral	55	18	1	21,175,000	6,930,000	3,850,000	22,167,000	54,122,000
270	27333	Arthrotomy, knee, for meniscectomy: medial AND lateral	60	20	1	23,100,000	7,700,000	3,850,000	23,395,000	58,045,000
271	27335	Arthrotomy, knee, for synovectomy: anterior AND/OR posterior including popliteal area	55	18	1	21,175,000	6,930,000	3,850,000	22,167,000	54,122,000
272	27350	Patellectomy or hemipatellectomy	55	18	1	21,175,000	6,930,000	3,850,000	24,951,000	56,906,000
273	27372	Removal of foreign body, deep, thigh region or knee area	35	12	1	13,475,000	4,620,000	3,850,000	16,893,000	38,838,000
274	27400	Tendon or muscle transfer, hamstrings to femur (Eggers type procedure)	55	18	1	21,175,000	6,930,000	3,850,000	22,167,000	54,122,000
275	27403	Arthrotomy with open meniscus repair	60	20	1	23,100,000	7,700,000	3,850,000	23,952,000	58,602,000
276	27405	Repair, primary, torn ligament and/or capsule, knee: collateral or cruciate	55	18	1	21,175,000	6,930,000	3,850,000	21,577,000	53,532,000
277	27409	Repair, primary, torn ligament and/or capsule, knee: collateral and cruciate	95	31	1	36,575,000	11,935,000	3,850,000	43,428,000	95,788,000
278	27418	Anterior tibial tubercle plasty for chondromalacia patellae (Maquet procedure)	60	20	1	23,100,000	7,700,000	3,850,000	22,806,000	57,456,000
279	27424	Reconstruction for recurrent dislocating patella: with patellectomy	55	18	1	21,175,000	6,930,000	3,850,000	31,798,000	63,753,000
280	27427	Ligamentous reconstruction (augmentation), knee: extra-articular	55	18	1	21,175,000	6,930,000	3,850,000	29,734,000	61,689,000
281	27428	Ligamentous reconstruction (augmentation), knee: intra-articular (open)	75	25	1	28,875,000	9,625,000	3,850,000	30,520,000	72,870,000
282	27435	Capsulotomy, knee, posterior capsular release	55	18	1	21,175,000	6,930,000	3,850,000	26,982,000	58,937,000
283	27438	Arthroplasty, patella: with prosthesis	60	20	1	23,100,000	7,700,000	3,850,000	29,358,000	64,008,000
284	27440	Arthroplasty, knee, tibial plateau	55	18	1	21,175,000	6,930,000	3,850,000	23,215,000	55,170,000
285	27443	Arthroplasty, knee, femoral condyles or tibial plateaus: with or without debridement and partial synovectomy	60	20	3	23,100,000	7,700,000	3,850,000	48,958,000	83,608,000
286	27446	Arthroplasty, knee condyle and plateau: medial OR lateral compartment	95	31	6	36,575,000	11,935,000	3,850,000	105,339,000	157,699,000
287	27447	Arthroplasty, knee condyle and plateau: medial AND lateral compartments with or without patella resurfacing ("total knee replacement")	140	46	6	53,900,000	17,710,000	3,850,000	115,723,000	191,183,000
288	27448	Osteotomy, femur, shaft or supracondylar: without fixation	60	20	1	23,100,000	7,700,000	3,850,000	23,854,000	58,504,000
289	27450	Osteotomy, femur, shaft or supracondylar: with fixation	105	35	1	40,425,000	13,475,000	3,850,000	37,236,000	94,986,000
290	27455	Osteotomy, proximal tibia, including fibular excision or osteotomy (includes correction of genu varus or genu valgus): before or after epiphyseal closure	95	31	1	36,575,000	11,935,000	3,850,000	32,487,000	84,847,000
291	27486	Revision of total knee arthroplasty, with or without allograft: one component	120	40	6	46,200,000	15,400,000	3,850,000	99,426,000	164,876,000
292	27487	Revision of total knee arthroplasty, with or without allograft: all components	160	53	6	61,600,000	20,405,000	3,850,000	94,315,000	180,170,000
293	27488	Removal of knee prosthesis, including "total knee", methyl methacrylate and insertion of spacer, when applicable	95	31	6	36,575,000	11,935,000	3,850,000	99,049,000	151,409,000
294	27502	Closed treatment of femoral shaft fracture: with manipulation, with or without skin or skeletal traction	55	18	3	21,175,000	6,930,000	3,850,000	35,314,000	67,269,000

CODE		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
295	27503	Closed treatment of supracondylar or transcondylar femoral fracture with or without intercondylar extension: with manipulation, with or without skin or skeletal traction	55	18	3	21,175,000	6,930,000	3,850,000	35,314,000	67,269,000
296	27510	Closed treatment of femoral fracture, distal end, medial or lateral condyle: with manipulation	55	18	3	21,175,000	6,930,000	3,850,000	35,314,000	67,269,000
297	27511	Open treatment of femoral supracondylar or transcondylar fracture without intercondylar extension, with internal fixation	85	28	5	32,725,000	10,780,000	3,850,000	66,873,000	114,228,000
298	27514	Open treatment of femoral fracture, distal end, medial or lateral condyle, with or without internal or external fixation	95	31	6	36,575,000	11,935,000	3,850,000	102,555,000	154,915,000
299	27517	Closed treatment of distal femoral epiphyseal separation: with manipulation, with or without skin or skeletal traction	55	18	3	21,175,000	6,930,000	3,850,000	35,314,000	67,269,000
300	27519	Open treatment of distal femoral epiphyseal separation, with or without internal or	90	30	3	34,650,000	11,550,000	3,850,000	50,793,000	100,843,000
301	27532	Closed treatment of tibial fracture, proximal (plateau): with or without manipulation, with skeletal traction	55	18	3	21,175,000	6,930,000	3,850,000	35,314,000	67,269,000
302	27550	Closed treatnent of knee dislocation	35	12	3	13,475,000	4,620,000	3,850,000	30,400,000	52,345,000
303	27558	Open treatment of knee dislocation with or without internal or external fixation: with primary ligamentous repair, with or without augmentation/reconstruction	100	33	5	38,500,000	12,705,000	3,850,000	89,821,000	144,876,000
304	27560	Closed treatment of patellar dislocation	35	12	3	13,475,000	4,620,000	3,850,000	30,400,000	52,345,000
305	27566	Open treatment of patellar dislocation, with or without partial or total patellectomy	60	20	5	23,100,000	7,700,000	3,850,000	78,847,000	113,497,000
306	27570	Manipulation of knee joint under general anesthesia (includes application of traction or other fixation devices)	15	0	1	5,775,000	0	3,850,000	12,208,000	21,833,000
307	27625	Arthrotomy, ankle, for synovectomy	40	13	1	15,400,000	5,005,000	3,850,000	20,349,000	44,604,000
308	27626	Arthrotomy, ankle, for synovectomy: including tenosynovectomy	60	20	1	23,100,000	7,700,000	3,850,000	24,934,000	59,584,000
309	27652	Repair, primary, open or percutaneous, ruptured Achilles tendon: with or without graft	60	20	1	23,100,000	7,700,000	3,850,000	27,982,000	62,632,000
310	27700	Arthroplasty, ankle	75	25	1	28,875,000	9,625,000	3,850,000	28,162,000	70,512,000
311	27705	Osteotomy: tibia or tibia and fibula	80	26	1	30,800,000	10,010,000	3,850,000	34,959,000	79,619,000
312	27752	Closed treatment of tibial shaft fracture (with or without fibular fracture): with	40	13	4	15,400,000	5,005,000	3,850,000	41,134,000	65,389,000
313	27758	Open treatment of tibial shaft fracture (with or without fibular fracture), with plate/screws, with or without cerclage	75	25	5	28,875,000	9,625,000	3,850,000	86,725,000	129,075,000
314	27781	Closed treatment of proximal or distal fibula or shaft fracture: with manipulation	25	0	4	9,625,000	0	3,850,000	37,449,000	50,924,000
315	27784	Open treatment of proximal or distal fibula or shaft fracture, with or without internal or external fixation	40	13	6	15,400,000	5,005,000	3,850,000	76,986,000	101,241,000
316	27830	Closed treatment of proximal tibiofibular joint dislocation	25	0	4	9,625,000	0	3,850,000	37,449,000	50,924,000
317	27842	Closed treatment of ankle dislocation, with percutaneous skeletal fixation	40	13	4	15,400,000	5,005,000	3,850,000	41,134,000	65,389,000
318	27846	Open treatment of ankle dislocation, with or without percutaneous skeletal fixation: without repair or internal fixation	60	20	6	23,100,000	7,700,000	3,850,000	66,763,000	101,413,000
319	27848	Open treatment of ankle dislocation, with or without percutaneous skeletal fixation: with repair or internal or external fixation	75	25	3	28,875,000	9,625,000	3,850,000	44,553,000	86,903,000
320	27860	Manipulation of ankle under general anesthesia (includes application of traction or other fixation apparatus)	15	0	3	5,775,000	0	3,850,000	26,632,000	36,257,000

CODE		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
321	27870	Arthrodesis, ankle, any method (separate procedure)	90	30	6	34,650,000	11,550,000	3,850,000	77,575,000	127,625,000
322	27871	Arthrodesis, tibiofibular joint, proximal or distal (separate procedure)	60	20	6	23,100,000	7,700,000	3,850,000	81,571,000	116,221,000

CODE		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
323	28020	Arthrotomy, with exploration, drainage or removal of loose or foreign body: intertarsal or tarsometatarsal joint or metatarsophalangeal joint or interphalangeal joint	35	12	1	13,475,000	4,620,000	3,850,000	17,646,000	39,591,000
324	28054	Arthrotomy for synovial biopsy: interphalangeal joint or metatarsophalangeal or intertarsal or tarsometatarsal	25	12	1	9,625,000	4,620,000	3,850,000	15,189,000	33,284,000
325	28070	Synovectomy, intertarsal, tarsometatarsal or metatarsophalangeal joint, each	35	12	1	13,475,000	4,620,000	3,850,000	17,646,000	39,591,000
326	28086	Synovectomy, tendon sheath, foot: flexor or extensor	25	12	1	9,625,000	4,620,000	3,850,000	15,189,000	33,284,000
327	28140	Metatarsectomy	50	16	1	19,250,000	6,160,000	3,850,000	21,430,000	50,690,000
328	28160	Hemiphalangectomy or interphalangeal joint excision, toe, single, each	25	12	1	9,625,000	4,620,000	3,850,000	15,222,000	33,317,000
329	28192	Removal of foreign body, foot: deep	35	12	1	13,475,000	4,620,000	3,850,000	17,416,000	39,361,000
330	28260	Capsulotomy, midfoot: medial release only with or without tendon lengthening (separate procedure)	50	16	1	19,250,000	6,160,000	3,850,000	19,464,000	48,724,000
331	28288	Ostectomy, partial, exostectomy or condylectomy, single, metatarsal head, first through fifth, each metatarsal head	25	12	1	9,625,000	4,620,000	3,850,000	17,449,000	35,544,000
332	28296	Hallux valgus (bunion) correction: with or without metatarsal osteotomy or tendon	55	18	1	21,175,000	6,930,000	3,850,000	43,165,000	75,120,000
333	28406	Closed treatment or percutaneous skeletal fixation of calcaneal fracture: with manipulation	35	12	1	13,475,000	4,620,000	3,850,000	16,500,000	38,445,000
334	28420	Open treatment of closed or open calcaneal fracture, with or without internal or external skeletal fixation: with primary autogenous bone graft (includes obtaining graft)	85	28	1	32,725,000	10,780,000	3,850,000	32,388,000	79,743,000
335	28436	Closed treatment or percutaneous skeletal fixation of talus fracture: with manipulation	25	12	1	9,625,000	4,620,000	3,850,000	15,288,000	33,383,000
336	28445	Open treatment of talus fracture, with or without internal or external fixation	70	23	1	26,950,000	8,855,000	3,850,000	25,099,000	64,754,000
337	28476	Closed treatment or percutaneous skeletal fixation of metatarsal fracture: with	25	12	1	9,625,000	4,620,000	3,850,000	14,632,000	32,727,000
338	28546	Percutaneous skeletal fixation of tarsal bone dislocation other than talotarsal, with manipulation	25	12	1	9,625,000	4,620,000	3,850,000	14,632,000	32,727,000
339	28555	Open treatment of tarsal bone dislocation, with or without internal or external fixation	40	13	1	15,400,000	5,005,000	3,850,000	18,973,000	43,228,000
340	28600	Closed treatment of tarsometatarsal joint dislocation	25	12	1	9,625,000	4,620,000	3,850,000	14,632,000	32,727,000
341	28636	Closed treatment or percutaneous skeletal fixation of metatarsophalangeal joint dislocation, with manipulation	25	12	1	9,625,000	4,620,000	3,850,000	14,632,000	32,727,000
342	28760	Arthrodesis, great toe, interphalangeal joint, with extensor hallucis longus transfer to first metatarsal neck (Jones type procedure) (separate procedure)	50	16	6	19,250,000	6,160,000	3,850,000	66,600,000	95,860,000
343	28800	Amputation, foot: midtarsal or transmetatarsal	50	16	5	19,250,000	6,160,000	3,850,000	54,703,000	83,963,000
344	28810	Amputation, metatarsal, with toe, single	40	13	5	15,400,000	5,005,000	3,850,000	52,279,000	76,534,000
345	28820	Amputation, toe: metatarsophalangeal joint	25	12	5	9,625,000	4,620,000	3,850,000	48,594,000	66,689,000
346	29000	Application of halo type body cast	20	0	1	7,700,000	0	3,850,000	12,978,000	24,528,000
347	29040	Application of body cast, shoulder to hips: including head and/or one or both thighs	20	0	1	7,700,000	0	3,850,000	12,978,000	24,528,000
348	29305	Application of hip spica cast: one leg	15	0	1	5,775,000	0	0	10,471,000	16,246,000
349	29325	Application of hip spica cast: one and one half spica or both legs	20	0	1	7,700,000	0	3,850,000	12,978,000	24,528,000

CODE		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
350	29355	Application of long leg cast (thigh to toes): walking or ambulatory type	10	0	1	3,850,000	0	0	9,243,000	13,093,000
351	29800	Arthroscopy, diagnostic: any joint, with or without biopsy, limited debridement, partial synovectoomy, removal of loose or foreign body, lysis and resection of adhesios or lavage and drainage (separate procedure)	40	13	1	15,400,000	5,005,000	3,850,000	23,788,000	48,043,000

CODE		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
		NERVOUS SYSTEM								
352	61500	Craniectomy: with excision of tumor or other bone lesion of skull	130	52	8	50,050,000	20,020,000	3,850,000	219,436,000	293,356,000
353	61543	Craniotomy, trephination, bone flap craniotomy: for partial or subtotal hemispherectomy	145	58	8	55,825,000	22,330,000	3,850,000	180,829,000	262,834,000
354	61548	Hypophysectomy or excision of pitutary tumor, transnasal or transseptal approach, non-stereotactic	160	64	8	61,600,000	24,640,000	3,850,000	162,631,000	252,721,000
355	61550	Craniectomy for craniostenosis: single or multiple sutures, or frontal or partial bone flap, or bifrontal bone flap	135	52	8	51,975,000	20,020,000	3,850,000	221,812,000	297,657,000
356	62000	Elevation of depressed skull fracture: simple, extradural	80	28	8	30,800,000	10,780,000	3,850,000	206,628,000	252,058,000
357	62194	Replacement or irrigation, subarachnoid/subdural catheter	35	16	6	13,475,000	6,160,000	3,850,000	65,338,000	88,823,000
358	62201	Ventriculocisternostomy, third ventricle: stereotactic method or any method	90	32	10	34,650,000	12,320,000	3,850,000	116,778,000	167,598,000
359	62230	Replacement or revision of CSF shunt, obstructed valve, or distal catheter in shunt system	70	25	4	26,950,000	9,625,000	3,850,000	73,371,000	113,796,000
360	62258	Removal of complete CSF shunt system: with replacement by similar or other shunt at same operation	110	39	10	42,350,000	15,015,000	3,850,000	126,277,000	187,492,000
361	62269	Biopsy of spinal cord, percutaneous needle	30	0	1	11,550,000	0	3,850,000	21,036,000	36,436,000
362	62270	Spinal puncture, diagnostic	10	0	1	3,850,000	0	3,850,000	7,342,000	15,042,000
363	63001	Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or diskectomy, one or two vertebral segments: cervical, thoracic, lumbar or sacral	110	39	5	42,350,000	15,015,000	3,850,000	104,466,000	165,681,000
364	63046	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral) with decompression of spinal cord, cauda equina and/or nerve root(s), single vertebral segment: thoracic or	110	39	5	42,350,000	15,015,000	3,850,000	104,466,000	165,681,000
365	63075	Diskectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophytectomy: cervical or thoracic , single	135	48	5	51,975,000	18,480,000	3,850,000	112,869,000	187,174,000
366	63650	Percutaneous implantation of neurostimulator electrodes: epidural	45	17	1	17,325,000	6,545,000	3,850,000	17,973,000	45,693,000
367	64722	Decompression of nerve	35	15	1	13,475,000	5,775,000	3,850,000	15,532,000	38,632,000
368	63744	Replacement, irrigation or revision of lumbosubarachnoid shunt	50	19	4	19,250,000	7,315,000	3,850,000	81,069,000	111,484,000
369	64856	Suture of major peripheral nerve, arm or leg: including transposition	95	32	2	36,575,000	12,320,000	3,850,000	37,372,000	90,117,000
370	64861	Suture of brachial or lumbar plexus	135	45	3	51,975,000	17,325,000	3,850,000	55,117,000	128,267,000
		EYE AND OCULAR ADNEXA								
371	65280	Repair of laceration: cornea and/or sclera, perforating, not involving uveal tissue	50	18	1	19,250,000	6,930,000	3,850,000	22,576,000	52,606,000
372	65400	Keratectomy: lamellar, partial (except pterygium)	40	16	1	15,400,000	6,160,000	3,850,000	19,366,000	44,776,000
373	65450	Destruction of lesion of cornea by cryotherapy, photocoagulation or thermo-cauterization	20	12	1	7,700,000	4,620,000	3,850,000	9,865,000	26,035,000
374	65710	Keratoplasty: lamellar	80	26	1	30,800,000	10,010,000	3,850,000	30,439,000	75,099,000
375	65771	Radial keratotomy	85	28	1	32,725,000	10,780,000	3,850,000	28,816,000	76,171,000
376	65855	Trabeculoplasty by laser surgery, one or more sessions (defined treatment series)	40	16	1	15,400,000	6,160,000	3,850,000	16,614,000	42,024,000
377	65860	Severing adhesions of anterior segment, laser technique (separate procedure)	30	15	1	11,550,000	5,775,000	3,850,000	11,896,000	33,071,000
378	66220	Repair of scleral staphyloma: without graft	50	18	1	19,250,000	6,930,000	3,850,000	20,676,000	50,706,000
379	66225	Repair of scleral staphyloma: with graft	75	25	1	28,875,000	9,625,000	3,850,000	26,475,000	68,825,000
380	66625	Iridectomy, with corneoscleral or corneal section: peripheral or sector, for glaucoma	45	17	1	17,325,000	6,545,000	3,850,000	18,318,000	46,038,000
381	66635	Iridectomy, with corneoscleral or corneal section: "optical" (separate procedure)	45	17	1	17,325,000	6,545,000	3,850,000	18,318,000	46,038,000

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382	66680	Repair of iris, ciliary body (as for iridodialysis)	45	17	1	17,325,000	6,545,000	3,850,000	18,318,000	46,038,000
383	66700	Ciliary boby destruction: diathermy, cyclophotocoagulation, cryotherapy or cyclodialysis	35	15	1	13,475,000	5,775,000	3,850,000	13,534,000	36,634,000
384	66761	Iridotomy/iridectomy by laser surgery (eg, for glaucoma)	25	13	1	9,625,000	5,005,000	3,850,000	5,607,000	24,087,000
385	66762	Iridoplasty by photocoagulation (eg, for improvement of vision, for widening of anterior chamber angle)	30	14	1	11,550,000	5,390,000	3,850,000	7,998,000	28,788,000
386	66984	Extra- or intracapsular cataract removal with insertion of intraocular lens prosthesis (one stage procedure), manual or mechanical technique	90	32	1	34,650,000	12,320,000	3,850,000	36,336,000	87,156,000
387	66985	Insertion of intraocular lens prosthesis (secondary implant), not associated with concurrent cataract removal, with or without anterior vitrectomy	70	23	1	26,950,000	8,855,000	3,850,000	29,226,000	68,881,000
388	67005	Removal of vitreous, anterior approach (open sky technique or limbal incision): partial, or subtotal removal with mechanical vitrectomy	45	18	1	17,325,000	6,930,000	3,850,000	20,185,000	48,290,000
389	67028	Intravitreal injection of pharmacologic agent (separate procedure)	20	12	1	7,700,000	4,620,000	3,850,000	8,260,000	24,430,000
390	67311	Strabismus surgery: any technique, any number of muscles	60	20	1	23,100,000	7,700,000	3,850,000	28,210,000	62,860,000
391	67515	Injection of therapeutic agent into Tenon's capsule	10	0	1	3,850,000	0	0	9,243,000	13,093,000
392	67700	Blepharotomy, drainage of abscess, eyelid	10	0	1	3,850,000	0	3,850,000	8,227,000	15,927,000
393	67710	Severing of tarsorrhaphy	10	12	1	3,850,000	4,620,000	3,850,000	7,441,000	19,761,000
394	67914	Repair of ectropion: suture or thermocauterization	25	13	1	9,625,000	5,005,000	3,850,000	15,352,000	33,832,000
395	68110	Excision of lesion, conjunctiva	15	0	1	5,775,000	0	3,850,000	13,485,000	23,110,000
396	68130	Excision of lesion, conjunctiva: with adjacent sclera	35	15	1	13,475,000	5,775,000	3,850,000	20,037,000	43,137,000
397	68200	Subconjunctival injection	5	0	1	1,925,000	0	3,850,000	8,341,000	14,116,000
398	68326	Conjunctivoplasty, with or without reconstruction cul-de-sac: with conjunctival graft, extensive rearrangement, or buccal mucous membrane graft (includes obtaining graft)	50	18	1	19,250,000	6,930,000	3,850,000	21,823,000	51,853,000
399	68340	Repair of symblepharon: division of symblepharon with or without insertion of conformer or contact lens	30	14	1	11,550,000	5,390,000	3,850,000	14,533,000	35,323,000
400	68360	Conjunctival flap: bridge or partial	30	14	1	11,550,000	5,390,000	3,850,000	14,533,000	35,323,000
401	68362	Conjunctival flap: total (eg, Gunderson thin flap or purse string flap)	50	18	1	19,250,000	6,930,000	3,850,000	19,366,000	49,396,000
		RESPIRATORY SYSTEM								
402	30140	Submucous resection turbinate, complete or partial	30	14	1	11,550,000	5,390,000	3,850,000	16,581,000	37,371,000
403	30520	Submucous resection of nasal septum	40	16	1	15,400,000	6,160,000	3,850,000	16,417,000	41,827,000
404	30540	Repair choanal atresia: intranasal	60	20	1	23,100,000	7,700,000	3,850,000	24,870,000	59,520,000
405	30801	Cauterization and/or ablation, mucosa of turbinates (separate procedure)	15	0	1	5,775,000	0	3,850,000	11,716,000	21,341,000
406	30901	Control nasal hemorrhage, any method (separate procedure)	15	12	1	5,775,000	4,620,000	3,850,000	15,811,000	30,056,000
407	30920	Ligation arteries: ethmoidal or internal maxillary artery, transantral	55	19	1	21,175,000	7,315,000	3,850,000	25,509,000	57,849,000
408	31020	Sinusotomy, maxillary (antrotomy): intranasal	20	12	1	7,700,000	4,620,000	3,850,000	13,240,000	29,410,000
409	31030	Sinusotomy maxillary (antrotomy): radical (Caldwell-Luc), with or without removal of antrochoanal polyps	40	16	2	15,400,000	6,160,000	3,850,000	28,380,000	53,790,000
410	31040	Pterygomaxillary fossa surgery, any approach	60	20	2	23,100,000	7,700,000	3,850,000	29,854,000	64,504,000
411	31070	Sinusotomy, sphenoid, frontal or intanasal	40	16	1	15,400,000	6,160,000	3,850,000	17,400,000	42,810,000

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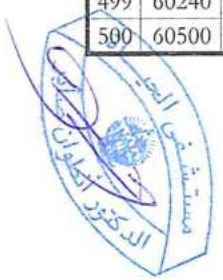
412	31075	Sinusotomy frontal: transorbital, unilateral (for mucocele or osteoma, Lynch type)	60	20	2	23,100,000	7,700,000	3,850,000	29,854,000	64,504,000
413	31080	Sinusotomy frontal: obliterative or nonbiliterarive	85	28	2	32,725,000	10,780,000	3,850,000	41,730,000	89,085,000
414	31090	Sinusotomy combined, three or more sinuses	75	25	2	28,875,000	9,625,000	3,850,000	37,405,000	79,755,000
415	31200	Ethmoidectomy	50	18	1	19,250,000	6,930,000	3,850,000	25,557,000	55,587,000
416	31300	Laryngotomy (thyrotomy, laryngofissure): with removal of tumor or laryngocele,	70	28	3	26,950,000	10,780,000	3,850,000	45,682,000	87,262,000
417	31360	Laryngectomy: total or subtotal supraglottic, without radical neck dissection	105	42	10	40,425,000	16,170,000	3,850,000	100,840,000	161,285,000
418	31370	Partial laryngectomy (hemilaryngectomy)	100	40	10	38,500,000	15,400,000	3,850,000	98,464,000	156,214,000
419	31400	Arytenoidectomy or arytenoidopexy, external approach	60	24	5	23,100,000	9,240,000	3,850,000	54,145,000	90,335,000
420	31420	Epiglottidectomy	60	24	1	23,100,000	9,240,000	3,850,000	24,967,000	61,157,000
421	31510	Laryngoscopy, direct or indirect, diagnostic with or without biopsy (separate procedure)	15	12	1	5,775,000	4,620,000	0	12,405,000	22,800,000
422	31580	Laryngoplasty other than cricoid split	100	40	1	38,500,000	15,400,000	3,850,000	33,649,000	91,399,000
423	31600	Tracheostomy, (separate procedure)	30	15	5	11,550,000	5,775,000	3,850,000	49,854,000	71,029,000
424	31611	Construction of tracheoesophageal fistula and subsequent insertion of an alaryngeal speech prosthesis (eg, voice button, Blom-Singer prosthesis)	30	15	1	11,550,000	5,775,000	3,850,000	16,680,000	37,855,000
425	31613	Tracheostoma revision (separate procedure)	35	17	1	13,475,000	6,545,000	3,850,000	19,054,000	42,924,000
426	31750	Tracheoplasty: cervical	60	24	7	23,100,000	9,240,000	3,850,000	67,425,000	103,615,000
427	31760	Tracheoplasty: intrathoracic	140	56	7	53,900,000	21,560,000	3,850,000	121,413,000	200,723,000
428	31820	Closure of tracheostomy or tracheal fistula: with or without plastic repair (separate procedure)	30	15	4	11,550,000	5,775,000	3,850,000	52,732,000	73,907,000
429	32035	Thoracostomy: with rib resection for empyema	50	20	7	19,250,000	7,700,000	3,850,000	97,138,000	127,938,000
430	32100	Thoracotomy: with exploration and biopsy, control of hemorrhage or postoperative complications	60	24	7	23,100,000	9,240,000	3,850,000	72,043,000	108,233,000
431	32310	Pleurectomy, parietal (separate procedure)	85	34	7	32,725,000	13,090,000	3,850,000	75,958,000	125,623,000
432	32400	Biopsy, pleura: percutaneous needle, one or more specimens	15	0	1	5,775,000	0	0	13,158,000	18,933,000
433	32405	Biopsy, lung or mediastinum, percutaneous needle	15	0	1	5,775,000	0	0	13,158,000	18,933,000
434	32480	Lobectomy, total or segmental, with or without bronchoplasty or decortication	120	48	7	46,200,000	18,480,000	3,850,000	93,141,000	161,671,000
435	32601	Thoracoscopy, diagnostic, with or without biopsy (separate procedure)	50	20	7	19,250,000	7,700,000	3,850,000	71,880,000	102,680,000
436	32653	Thoracoscopy, surgical: with removal of intrapleural foreign body, fibrin or control of traumatic hemorrhage,	80	32	7	30,800,000	12,320,000	3,850,000	76,924,000	123,894,000
437	32655	Thoracoscopy, surgical: with excision-plication of bullae, including any pleural procedure, with or without parietal pleurectomy	80	32	7	30,800,000	12,320,000	3,850,000	76,924,000	123,894,000
438	32663	Thoracoscopy, surgical: with segmental or total lobectomy, or wedge resection(s) of lung	100	40	7	38,500,000	15,400,000	3,850,000	81,838,000	139,588,000
439	32664	Thoracoscopy, surgical: with thoracic sympathectomy	85	34	7	32,725,000	13,090,000	3,850,000	78,153,000	127,818,000
440	32900	Resection of ribs, extrapleural, all stages	60	24	3	23,100,000	9,240,000	3,850,000	36,216,000	72,406,000
441	32905	Thoracoplasty	150	60	1	57,750,000	23,100,000	3,850,000	50,520,000	135,220,000
442	32960	Pneumothorax, therapeutic	15	12	1	5,775,000	4,620,000	3,850,000	10,471,000	24,716,000

CODE		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
		MEDIASTINUM AND DIAPHRAGM								
443	39200	Excision of mediastinal cyst	80	32	7	30,800,000	12,320,000	3,850,000	78,169,000	125,139,000
444	39220	Excision of mediastinal tumor	100	40	7	38,500,000	15,400,000	3,850,000	92,061,000	149,811,000
445	39400	Mediastinoscopy, with or without biopsy	30	15	1	11,550,000	5,775,000	3,850,000	21,757,000	42,932,000
446	39501	Repair of diaphragmatic laceration, any approach	90	36	5	34,650,000	13,860,000	3,850,000	55,390,000	107,750,000
447	50020	Drainage of perirenal or renal abscess (separate procedure)	70	25	3	26,950,000	9,625,000	3,850,000	36,280,000	76,705,000
		URINARY SYSTEM								
448	50045	Nephrotomy, with exploration	80	28	4	30,800,000	10,780,000	3,850,000	49,227,000	94,657,000
449	50065	Nephrolithotomy: secondary surgical operation for calculus	120	42	6	46,200,000	16,170,000	3,850,000	88,254,000	154,474,000
450	50200	Renal biopsy: percutaneous, by trocar or needle	20	0	1	7,700,000	0	3,850,000	15,762,000	27,312,000
451	50205	Renal biopsy: by surgical exposure of kidney	75	27	1	28,875,000	10,395,000	3,850,000	14,796,000	57,916,000
452	50220	Nephrectomy, including partial ureterectomy, any approach including rib resection	100	35	6	38,500,000	13,475,000	3,850,000	84,585,000	140,410,000
453	50230	Nephrectomy, including partial ureterectomy, any approach including rib resection: radical, with regional lymphadenectomy and/or vena caval thrombectomy	140	50	5	53,900,000	19,250,000	3,850,000	92,835,000	169,835,000
454	50234	Nephrectomy, with total ureterectomy and bladder cuff	140	50	5	53,900,000	19,250,000	3,850,000	90,837,000	167,837,000
455	50240	Nephrectomy, partial	100	35	6	38,500,000	13,475,000	3,850,000	87,993,000	143,818,000
456	50340	Recipient nephrectomy (separate procedure), bilateral	100	35	6	38,500,000	13,475,000	3,850,000	87,993,000	143,818,000
457	50393	Introduction of ureteral catheter or stent into ureter through renal pelvis for drainage and/or injection, percutaneous	25	0	1	9,625,000	0	3,850,000	15,352,000	28,827,000
458	50590	Lithotripsy, extracorporeal shock wave	65	0	1	25,025,000	0	3,850,000	20,037,000	48,912,000
459	50610	Ureterolithotomy	70	25	6	26,950,000	9,625,000	3,850,000	65,290,000	105,715,000
460	50650	Ureterectomy, with bladder cuff (separate procedure)	95	34	6	36,575,000	13,090,000	3,850,000	85,813,000	139,328,000
461	50951	Ureteral endoscopy through established ureterostomy diagnostic or therapeutic	30	0	1	11,550,000	0	3,850,000	19,366,000	34,766,000
462	51020	Cystotomy or cystostomy: with fulguration and/or insertion of radioactive material	25	13	1	9,625,000	5,005,000	3,850,000	14,190,000	32,670,000
463	51045	Cystotomy, with insertion of ureteral catheter or stent (separate procedure)	40	16	1	15,400,000	6,160,000	3,850,000	17,892,000	43,302,000
464	51050	Cystolithotomy, cystotomy with removal of calculus: without vesical neck dissection	40	16	1	15,400,000	6,160,000	3,850,000	23,887,000	49,297,000
465	51060	Transvesical ureterolithotomy	45	17	1	17,325,000	6,545,000	3,850,000	23,968,000	51,688,000
466	51530	Cystotomy: for excision of bladder tumor	75	27	6	28,875,000	10,395,000	3,850,000	73,038,000	116,158,000
467	51575	Cystectomy, complete: with bilateral pelvic lymphadenectomy, including external iliac, hypogastric and obturator nodes	200	70	12	77,000,000	26,950,000	3,850,000	215,364,000	323,164,000
468	51700	Bladder irrigation, simple, lavage and/or irrigation (separate procedure)	5	0	1	1,925,000	0	3,850,000	5,295,000	11,070,000
469	51705	Change of cystostomy tube (separate procedure)	10	0	1	3,850,000	0	3,850,000	9,243,000	16,943,000
470	51785	Electromyography studies (EMG) of anal or urethral sphincter, any technique	10	0	1	3,850,000	0	3,850,000	9,243,000	16,943,000
471	51792	Stimulus evoked response (eg, measurement of bulbocavernous reflex latency time)	10	0	1	3,850,000	0	3,850,000	9,243,000	16,943,000
472	51797	Voiding pressure studies (VP): intra-abdominal voiding pressure (AP) (rectal, gastric, intra-	10	0	1	3,850,000	0	3,850,000	6,523,000	14,223,000

CODE		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
473	51860	Cystorrhaphy, suture of bladder wound, injury or rupture	70	25	4	26,950,000	9,625,000	3,850,000	50,242,000	90,667,000
474	51900	Closure of vesicovaginal fistula	80	26	6	30,800,000	10,010,000	3,850,000	74,266,000	118,926,000
475	52000	Cystourethroscopy diagnostic or therapeutic	25	12	1	9,625,000	4,620,000	3,850,000	16,990,000	35,085,000

CODE		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
476	52204	Cystourethroscopy, with biopsy (separate procedure)	25	12	1	9,625,000	4,620,000	3,850,000	17,383,000	35,478,000
477	52214	Cystourethroscopy, with fulguration (including cryosurgery or laser surgery) of trigone, bladder neck, prostatic fossa, urethra, or periurethral glands	25	12	1	9,625,000	4,620,000	3,850,000	15,648,000	33,743,000
478	52277	Cystourethroscopy, with resection of external sphincter (sphincterotomy)	40	16	1	15,400,000	6,160,000	3,850,000	21,036,000	46,446,000
479	52290	Cystourethroscopy: with ureteral meatotomy, unilateral or bilateral (separate procedure)	30	0	1	11,550,000	0	3,850,000	16,090,000	31,490,000
480	52310	Cystourethroscopy, with removal of foreign body, calculus, or ureteral stent from urethra or bladder (separate procedure)	30	14	1	11,550,000	5,390,000	3,850,000	20,446,000	41,236,000
481	52317	Litholapaxy: crushing or fragmentation of calculus by any means in bladder and removal of fragments	50	18	1	19,250,000	6,930,000	3,850,000	24,115,000	54,145,000
482	52320	Cystourethroscopy (including ureteral catheterization): removal or fragmentation of ureteral calculus, with or without manipulation (separate procedure)	40	16	1	15,400,000	6,160,000	3,850,000	32,437,000	57,847,000
483	52332	Cystourethroscopy, with insertion of indwelling ureteral stent (eg, Gibbons or double-J type) (separate procedure)	25	12	1	9,625,000	4,620,000	3,850,000	14,632,000	32,727,000
484	52334	Cystourethroscopy, with insertion of ureteral guide wire through kidney to establish a percutaneous nephrostomy, retrograde (separate procedure)	35	15	1	13,475,000	5,775,000	3,850,000	19,693,000	42,793,000
485	52450	Transurethral incision of prostate	45	17	1	17,325,000	6,545,000	3,850,000	22,117,000	49,837,000
486	52500	Transurethral resection of bladder neck (separate procedure)	50	18	1	19,250,000	6,930,000	3,850,000	24,508,000	54,538,000
487	52510	Transurethral balloon dilation of the prostatic urethra, any method	40	16	1	15,400,000	6,160,000	3,850,000	19,234,000	44,644,000
488	52601	Transurethral resection of prostate including complete vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy	100	33	6	38,500,000	12,705,000	3,850,000	88,680,000	143,735,000
489	52650	Transurethral cryosurgical removal of prostate (postoperative irrigations and aspiration of sloughing tissue included)	70	23	1	26,950,000	8,855,000	3,850,000	28,309,000	67,964,000
490	52700	Transurethral drainage of prostatic abscess	40	16	1	15,400,000	6,160,000	3,850,000	17,892,000	43,302,000
491	53200	Biopsy of urethra	15	12	1	5,775,000	4,620,000	3,850,000	12,339,000	26,584,000
492	53210	Urethrectomy, total, including cystostomy	90	30	1	34,650,000	11,550,000	3,850,000	32,470,000	82,520,000
493	53670	Catheterization, urethra (sonde foley - foley cath)	5	0	1	1,925,000	0	0	5,721,000	7,646,000
		HEMIC AND LYMPHATIC SYSTEMS								
494	38100	Splenectomy	90	31	5	34,650,000	11,935,000	3,850,000	75,702,000	126,137,000
495	38500	Biopsy or excision of lymph node(s): superficial (separate procedure)	20	12	1	7,700,000	4,620,000	3,850,000	14,812,000	30,982,000
496	38510	Biopsy or excision of lymph node(s): deep (cervical with or without excision of scalene fat pad, or axillary nodes) (separate procedure)	30	14	1	11,550,000	5,390,000	3,850,000	17,269,000	38,059,000
		ENDOCRINE SYSTEM								
497	60220	Total thyroid lobectomy, unilateral (hemithyroidectomy)	90	30	3	34,650,000	11,550,000	3,850,000	51,547,000	101,597,000
498	60225	Total thyroid lobectomy, unilateral: with contralateral subtotal lobectomy, including	110	36	3	42,350,000	13,860,000	3,850,000	54,463,000	114,523,000
499	60240	Thyroidectomy, total or complete	120	40	4	46,200,000	15,400,000	3,850,000	63,346,000	128,796,000
500	60500	Parathyroidectomy	105	35	4	40,425,000	13,475,000	3,850,000	59,464,000	117,214,000



ملحق رقم إثنين: أسعار الدرجة العامة (أسعار مقطوعة) في المستشفيات المتعاقدة المصنفة (A/B)

		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
		AUDITORY SYSTEM								
1	69200	Removal foreign body from external auditory canal (separate procedure)	5	0	1	1,750,000	0	0	4,312,000	6,062,000
2	69420	Myringotomy including aspiration and/or eustachian tube inflation (separate procedure)	15	0	1	5,250,000	0	3,500,000	8,721,000	17,471,000
3	69433	Tympanostomy (requiring insertion of ventilating tube)	20	12	1	7,000,000	4,200,000	3,500,000	11,301,000	26,001,000
4	69501	Mastoidectomy: simple	75	25	2	26,250,000	8,750,000	3,500,000	31,312,000	69,812,000
5	69511	Mastoidectomy: radical, any procedure	90	30	4	31,500,000	10,500,000	3,500,000	52,524,000	98,024,000
6	69620	Myringoplasty, uncomplicated	60	20	2	21,000,000	7,000,000	3,500,000	24,597,000	56,097,000
7	69631	Tympanoplasty without mastoidectomy (including canalplasty, atticotomy and/or middle ear surgery), initial or revision: any method	75	25	2	26,250,000	8,750,000	3,500,000	32,281,000	70,781,000
8	69635	Tympanoplasty with antrotomy or mastoidectomy (including canalplasty, atticotomy, middle ear surgery, and/or tympanic membrane repair): with or without ossicular chain reconstruction, any method	110	36	3	38,500,000	12,600,000	3,500,000	49,576,000	104,176,000
9	69660	Stapedectomy or stapedotomy with reestablishment of ossicular continuity, with or without use of foreign material	80	26	2	28,000,000	9,100,000	3,500,000	35,544,000	76,144,000
10	69801	Labyrinthotomy, with or without cryosurgery or other nonexcisional destructive procedures or tack procedure: transcanal	50	18	2	17,500,000	6,300,000	3,500,000	25,224,000	52,524,000
11	69905	Labyrinthectomy: transcanal	75	25	2	26,250,000	8,750,000	3,500,000	31,749,000	70,249,000
		CARDIO SYSTEM								
12	33200	Insertion of permanent pacemaker with epicardial electrode(s): open procedure	75	33	1	26,250,000	11,550,000	3,500,000	39,748,000	81,048,000
13	33210	Insertion or replacement of temporary transvenous single chamber cardiac electrode, or pacemaker catheter (separate procedure)	25	0	1	8,750,000	0	3,500,000	21,811,000	34,061,000
14	33245	Implantation of automatic implantable cardioverter-defibrillator pads with or without sensing electrodes	85	0	1	29,750,000	0	3,500,000	31,380,000	64,630,000
15	33247	Insertion or replacement of implantable cardioverter-defibrillator lead(s) by other than thoracotomy	65	0	1	22,750,000	0	3,500,000	20,596,000	46,846,000
16	33250	Operative ablation of supraventricular arrhythmogenic focus or pathway (eg, Wolff-Parkinson-White, A-V node re-entry), tract(s), and or focus (foci)	150	67	7	52,500,000	23,450,000	3,500,000	173,791,000	253,241,000
17	33411	Replacement, aortic valve: with or without aortic annulus enlargement, noncoronary cusp	130	65	7	45,500,000	22,750,000	3,500,000	246,190,000	317,940,000
18	33416	Resection or incision of subvalvular aortic stenosis	175	87	5	61,250,000	30,450,000	3,500,000	190,690,000	285,890,000
19	33420	Valvotomy, mitral valve (commisurotomy): closed	145	72	7	50,750,000	25,200,000	3,500,000	82,977,000	162,427,000
20	33425	Valvuloplasty, mitral valve, any method	150	75	7	52,500,000	26,250,000	3,500,000	207,042,000	289,292,000
21	33430	Replacement, mitral valve	125	65	7	43,750,000	22,750,000	3,500,000	262,980,000	332,980,000
22	33452	Valvotomy, tricuspid valve	95	47	7	33,250,000	16,450,000	3,500,000	169,504,000	222,704,000
23	33460	Valvuloplasty or valvectomy, tricuspid valve, with or without insertion of tricuspid ring	125	65	7	43,750,000	22,750,000	3,500,000	186,130,000	256,130,000
24	33468	Tricuspid valve replacement or repositioning and plication for Ebstein anomaly	130	65	7	45,500,000	22,750,000	3,500,000	186,157,000	257,907,000
25	33472	Valvotomy, pulmonary valve (commisurotomy) closed or open	95	47	7	33,250,000	16,450,000	3,500,000	173,026,000	226,226,000
26	33478	Pulmonary artery patch for supraventricular stenosis	140	70	6	49,000,000	24,500,000	3,500,000	174,691,000	251,691,000
27	33480	Double valve procedure	250	125	6	87,500,000	43,750,000	3,500,000	263,280,000	398,030,000

		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
28	33641	Repair atrial septal defect, secundum, with or without patch	100	50	7	35,000,000	17,500,000	3,500,000	165,246,000	221,246,000
29	33647	Repair of atrial septal defect and ventricular septal defect, with direct or patch closure	200	100	6	70,000,000	35,000,000	3,500,000	177,231,000	285,731,000
30	33648	Correction of cor triatriatum	190	95	6	66,500,000	33,250,000	3,500,000	189,952,000	293,202,000
31	33650	Bicaval - bipulmonary bypass procedure	270	135	6	94,500,000	47,250,000	3,500,000	181,408,000	326,658,000
32	33649	Repair of tricuspid atresia	270	135	6	94,500,000	47,250,000	3,500,000	198,006,000	343,256,000
33	33670	Repair of complete atrioventricular canal, with prosthetic valve	250	125	6	87,500,000	43,750,000	3,500,000	209,991,000	344,741,000
34	33684	Closure of ventricular septal defect, with pulmonary valvotomy or infundibular resection, with or without patch	200	100	6	70,000,000	35,000,000	3,500,000	203,575,000	312,075,000
35	33690	Banding of pulmonary artery	100	50	6	35,000,000	17,500,000	3,500,000	175,456,000	231,456,000
36	33697	Complete repair of tetralogy of Fallot: with or without closure of previous shunt	250	125	6	87,500,000	43,750,000	3,500,000	220,938,000	355,688,000
37	33710	Repair sinus of Valsalva fistula, with/ without repair of ventricular septal defect	150	75	6	52,500,000	26,250,000	3,500,000	183,783,000	266,033,000
38	33720	Repair sinus of Valsalva aneurysm	90	45	6	31,500,000	15,750,000	3,500,000	160,032,000	210,782,000
39	33730	Complete repair of total anomalous venous return	200	100	6	70,000,000	35,000,000	3,500,000	203,575,000	312,075,000
40	33735	Atrial septectomy or septostomy any method	120	60	6	42,000,000	21,000,000	3,500,000	201,118,000	267,618,000
41	33750	Shunt: systemic or vena cava to pulmonary artery, with or without graft	120	60	6	42,000,000	21,000,000	3,500,000	183,373,000	249,873,000
42	33774	Repair of transposition of the great arteries, any method	300	150	6	105,000,000	52,500,000	3,500,000	229,783,000	390,783,000
43	33784	Total repair of double outlet ventricle	350	175	6	122,500,000	61,250,000	3,500,000	220,911,000	408,161,000
44	33785	Total repair of single ventricle (double inlet ventricle)	350	175	6	122,500,000	61,250,000	3,500,000	220,911,000	408,161,000
45	33786	Total repair, truncus arteriosus (Rastelli type operation)	200	100	6	70,000,000	35,000,000	3,500,000	190,225,000	298,725,000
46	33788	Reimplantation of anomalous pulmonary artery	125	65	6	43,750,000	22,750,000	3,500,000	173,872,000	243,872,000
47	33800	Aortic suspension (aortopexy) for tracheal decompression (eg, for tracheomalacia) (separate procedure)	100	50	5	35,000,000	17,500,000	3,500,000	168,822,000	224,822,000
48	33820	Patent ductus arteriosus: ligation and/or division, any age	120	60	7	42,000,000	21,000,000	3,500,000	77,313,000	143,813,000
49	33840	Excision or repair of coarctation of aorta, with or without associated patent ductus arteriosus, any type	180	90	5	63,000,000	31,500,000	3,500,000	161,643,000	259,643,000
50	33870	Transverse arch graft, with or without cardiopulmonary by-pass	210	105	5	73,500,000	36,750,000	3,500,000	149,085,000	262,835,000
51	33875	Descending thoracic aorta graft, with or without cardiopulmonary by-pass	175	90	5	61,250,000	31,500,000	3,500,000	158,857,000	255,107,000
52	33877	Repair of thoracoabdominal aortic aneurysm with graft	230	115	5	80,500,000	40,250,000	3,500,000	145,317,000	269,567,000
53	33916	Pulmonary embolectomy or endarterectomy with or without embolectomy	125	65	6	43,750,000	22,750,000	3,500,000	156,127,000	226,127,000
54	34001	Arterial embolectomy or thrombectomy, with or without catheter: carotid, subclavian, innominate, axillary, brachial, radial, or ulnar artery (separate procedure)	85	34	2	29,750,000	11,900,000	3,500,000	31,668,000	76,818,000
55	34203	Arterial embolectomy or thrombectomy, with or without catheter: popliteal-tibio-peroneal, femoropopliteal, or aortoiliac artery (separate procedure)	80	30	3	28,000,000	10,500,000	3,500,000	40,840,000	82,840,000
56	34451	Venous thrombectomy, direct or with catheter: vena cava, iliac, or femoropopliteal vein, by abdominal and leg incision (separate procedure)	90	35	3	31,500,000	12,250,000	3,500,000	40,021,000	87,271,000
57	34471	Venous thrombectomy, direct or with catheter: axillary and subclavian vein, by neck or arm incision (separate procedure)	65	25	1	22,750,000	8,750,000	3,500,000	22,180,000	57,180,000
58	34501	Valvuloplasty, femoral vein (separate procedure)	120	40	3	42,000,000	14,000,000	3,500,000	44,170,000	103,670,000
59	34510	Venous valve transposition, any vein donor (separate procedure)	120	40	3	42,000,000	14,000,000	3,500,000	44,170,000	103,670,000
60	34530	Saphenopopliteal vein anastomosis (separate procedure)	120	40	3	42,000,000	14,000,000	3,500,000	44,170,000	103,670,000

		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
61	35001	Direct repair of aneurysm, false aneurysm, or excision and graft insertion, with or without patch graft for aneurysm, ruptured aneurysm, or occlusive disease: carotid, subclavian, innominate, vertebral, or axillary- brachial artery	130	50	5	45,500,000	17,500,000	3,500,000	134,533,000	201,033,000
62	35045	Direct repair of aneurysm, false aneurysm, or excision and graft insertion, with or without patch graft: for aneurysm, false aneurysm, ruptured aneurysm or occlusive disease, radial or ulnar artery	75	30	1	26,250,000	10,500,000	3,500,000	25,497,000	65,747,000
63	35231	Repair blood vessel, with graft: neck, extremity, hand, finger	80	26	1	28,000,000	9,100,000	3,500,000	27,490,000	68,090,000
64	35241	Repair blood vessel, with graft: intrathoracic, with bypass	150	75	5	52,500,000	26,250,000	3,500,000	150,859,000	233,109,000
65	35246	Repair blood vessel, with graft: intrathoracic without bypass	125	55	5	43,750,000	19,250,000	3,500,000	97,624,000	164,124,000
66	35301	Thromboendarterectomy, with or without patch graft: carotid, vertebral, subclavian, innominate	125	50	5	43,750,000	17,500,000	3,500,000	102,375,000	167,125,000
67	35331	Thromboendarterectomy, with or without patch graft: abdominal aorta, and/or major branches, iliac - femoral	175	70	5	61,250,000	24,500,000	3,500,000	142,150,000	231,400,000
68	35381	Thromboendarterectomy, with or without patch graft: axillary, brachial, common femoral, deep (profunda), femoral and/or popliteal, and/or tibioperoneal	100	35	5	35,000,000	12,250,000	3,500,000	107,533,000	158,283,000
69	35526	Bypass graft, with vein or prosthesis: carotid, subclavian , vertebral, axillary,	125	44	5	43,750,000	15,400,000	3,500,000	107,589,000	170,239,000
70	35531	Bypass graft, with vein or prosthesis: aorto-splenic, renal, iliac, celiac, or mesenteric	165	66	5	57,750,000	23,100,000	3,500,000	141,741,000	226,091,000
71	36010	Introduction of catheter, superior or inferior vena cava (separate procedure)	15	0	1	5,250,000	0	3,500,000	9,282,000	18,032,000
72	36215	Selective catheter placement, arterial system: any site (separate procedure)	35	15	1	12,250,000	5,250,000	3,500,000	14,440,000	35,440,000
73	36260	Insertion of implantable intra-arterial infusion pump (eg, for chemotherapy of liver) (separate procedure)	60	20	1	21,000,000	7,000,000	3,500,000	19,573,000	51,073,000
74	36420	Placement of peripheral venous catheter by cutdown (outside O.R.) (separate procedure)	10	0	1	3,500,000	0	3,500,000	7,315,000	14,315,000
75	36488	Placement of central venous catheter (subclavian, jugular, or other vein): percutaneous or cutdown separate procedure)	15	0	1	5,250,000	0	3,500,000	9,282,000	18,032,000
76	36510	Catheterization of umbilical vein (separate procedure)	10	0	1	3,500,000	0	3,500,000	7,315,000	14,315,000
77	36530	Percutaneous insertion or revision of implantable intravenous infusion pump chamber or Broviac catheter (separate procedure)	35	15	1	12,250,000	5,250,000	3,500,000	14,440,000	35,440,000
78	36821	Arterio-venous anastomosis, direct, any site	60	20	1	21,000,000	7,000,000	3,500,000	19,573,000	51,073,000
79	36825	Creation of arteriovenous fistula: any graft	70	23	1	24,500,000	8,050,000	3,500,000	23,532,000	59,582,000
80	37205	Transcatheter placement of an intravascular stent, (non coronary vessel), percutaneous or open: initial vessel	55	20	1	19,250,000	7,000,000	3,500,000	17,580,000	47,330,000
81	93548	Combined left heart catheterization, selective coronary angiography, one or more coronary arteries, selective left ventricular angiography, with aortic root aortography	50	0	1	17,500,000	0	3,500,000	23,887,000	44,887,000
82	93549	Combined right and left heart catheterization, selective coronary angiography, one or more coronary arteries, and selective ventricular angiography	60	0	1	21,000,000	0	3,500,000	24,843,000	49,343,000
83	92982	Percutaneous transluminal angioplasty: single vessel	85	0	2	29,750,000	0	3,500,000	40,267,000	73,517,000
84	33510	Coronary artery bypass, single coronary graft, vein or artery, (includes obtaining graft)	170	85	5	59,500,000	29,750,000	3,500,000	205,636,000	298,386,000
85	33511	Coronary artery bypass, double coronary graft, vein or artery, (includes obtaining grafts), with or without endarterectomy	190	95	5	66,500,000	33,250,000	3,500,000	207,480,000	310,730,000
86	33512	Coronary artery bypass, triple coronary graft, vein or artery, (includes obtaining grafts), with or without endarterectomy	200	100	5	70,000,000	35,000,000	3,500,000	210,550,000	319,050,000

		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
DIGESTIVE SYSTEM										
87	42505	Plastic repair of salivary duct, sialodochoplasty: secondary or complicated	40	16	1	14,000,000	5,600,000	3,500,000	11,683,000	34,783,000
88	42821	Tosillectomy and adenoidectomy, including treatment of postoperative complications: any age	35	16	1	12,250,000	5,600,000	3,500,000	15,355,000	36,705,000
89	42830	Adenoidectomy (separate procedure): primary or secondary	20	13	1	7,000,000	4,550,000	3,500,000	13,444,000	28,494,000
90	43200	Esophagoscopy, rigid or flexible fiberoptic: diagnostic (separate procedure)	15	0	0	5,250,000	0	0	1,842,000	7,092,000
91	43205	Esophagoscopy, rigid or flexible fiberoptic: therapeutic	30	15	0	10,500,000	5,250,000	0	9,253,000	25,003,000
92	43260	Endoscopic retrograde cholangiopancreatography (ERCP) diagnostic (separate procedure)	40	17	1	14,000,000	5,950,000	3,500,000	12,721,000	36,171,000
93	43300	Esophagoplasty (plastic repair or reconstruction), cervical approach: without repair of tracheoesophageal fistula	60	20	5	21,000,000	7,000,000	3,500,000	47,229,000	78,729,000
94	43305	Esophagoplasty (plastic repair or reconstruction), cervical approach: with repair of tracheoesophageal fistula	100	40	7	35,000,000	14,000,000	3,500,000	69,778,000	122,278,000
95	43340	Esophagojejunostomy (without total gastrectomy)	100	34	5	35,000,000	11,900,000	3,500,000	58,749,000	109,149,000
96	43450	Dilation of esophagus, by unguided sound or bougie, single or multiple passes	15	0	1	5,250,000	0	0	10,387,000	15,637,000
97	43500	Gastrotomy: with exploration or removal of foreign body	70	24	5	24,500,000	8,400,000	3,500,000	52,497,000	88,897,000
98	43620	Gastrectomy, total: with repair by intestinal transplant, without lymphadenectomy	160	56	8	56,000,000	19,600,000	3,500,000	131,094,000	210,194,000
99	43761	Repositioning of the gastric feeding tube through the duodenum for enteric nutrition (separate procedure)	15	0	1	5,250,000	0	0	9,295,000	14,545,000
100	43825	Gastrojejunostomy with vagotomy, any type	115	40	7	40,250,000	14,000,000	3,500,000	74,269,000	132,019,000
101	43830	Gastrostomy	70	24	1	24,500,000	8,400,000	3,500,000	21,675,000	58,075,000
102	43860	Revision of gastrojejunostomy with reconstruction, with or without vagotomy	120	42	5	42,000,000	14,700,000	3,500,000	68,740,000	128,940,000
103	44020	Enterotomy, small bowel other than duodenum: for exploration, biopsy, or foreign body removal (separate procedure)	75	27	4	26,250,000	9,450,000	3,500,000	49,563,000	88,763,000
104	44120	Enterectomy: with anastomosis	95	34	6	33,250,000	11,900,000	3,500,000	68,400,000	117,050,000
105	44146	Colectomy, partial: with colpoproctostomy (low pelvic anastomosis), with or without colostomy	130	46	5	45,500,000	16,100,000	3,500,000	73,054,000	138,154,000
106	44150	Colectomy, total, abdominal, without proctectomy: with continent ileostomy or ileoproctostomy	135	44	6	47,250,000	15,400,000	3,500,000	78,718,000	144,868,000
107	44153	Colectomy, total or subtotal, with proctectomy: with rectal mucosectomy, ileoanal or coloanal anastomosis, creation of reservoir (S or J), with or without loop ileostomy or colostomy	180	63	10	63,000,000	22,050,000	3,500,000	114,468,000	203,018,000
108	44345	Reconstruction of colostomy (separate procedure)	70	25	5	24,500,000	8,750,000	3,500,000	54,763,000	91,513,000
109	44388	Fiberoptic colonoscopy through colostomy: diagnostic or therapeutic (separate	15	0	1	5,250,000	0	0	6,346,000	11,596,000
110	44625	Closure of enterostomy, large or small intestine: with or without resection and anastomosis	80	28	5	28,000,000	9,800,000	3,500,000	58,558,000	99,858,000
111	44950	Appendectomy, any method (non-incidental procedure)	60	21	3	21,000,000	7,350,000	3,500,000	34,779,000	66,629,000
112	45000	Transrectal drainage of pelvic abscess (separate procedure)	25	14	1	8,750,000	4,900,000	3,500,000	12,406,000	29,556,000
113	45020	Incision and drainage of deep supralevator, pelvirectal, or retrorectal abscess	25	14	1	8,750,000	4,900,000	3,500,000	12,406,000	29,556,000
114	45110	Proctectomy: complete, combined abdominoperineal, with colostomy, one or two stages	150	53	7	52,500,000	18,550,000	3,500,000	88,560,000	163,110,000
115	45505	Proctoplasty: for prolapse of mucous membrane or stenosis	50	18	1	17,500,000	6,300,000	3,500,000	17,799,000	45,099,000

		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
116	45905	Dilation of anal or rectal sphincter (separate procedure) under anesthesia	15	12	1	5,250,000	4,200,000	3,500,000	9,622,000	22,572,000
117	46040	Incision and drainage of ischiorectal, perirectal or perianal abscess (separate procedure)	35	16	1	12,250,000	5,600,000	3,500,000	12,543,000	33,893,000
118	46060	Incision and drainage of ischiorectal or intramural abscess, with fistulectomy, submuscular	40	16	1	14,000,000	5,600,000	3,500,000	15,834,000	38,934,000
119	46080	Sphincterotomy, anal (separate procedure)	30	15	1	10,500,000	5,250,000	3,500,000	10,891,000	30,141,000
120	46200	Fissurectomy, with or without sphincterotomy	35	16	1	12,250,000	5,600,000	3,500,000	13,635,000	34,985,000
121	46262	Hemorrhoidectomy, internal and external: with fistulectomy and/or fissurectomy	50	18	2	17,500,000	6,300,000	3,500,000	26,125,000	53,425,000
122	46270	Surgical treatment of anal fistula: fistulotomy / fistulectomy (separate procedure)	45	17	1	15,750,000	5,950,000	3,500,000	18,058,000	43,258,000
123	46750	Sphincteroplasty, anal, for incontinence or prolapse	65	22	3	22,750,000	7,700,000	3,500,000	34,329,000	68,279,000
124	46760	Sphincteroplasty, anal, for incontinence: muscle transplant	150	50	10	52,500,000	17,500,000	3,500,000	99,453,000	172,953,000
125	46937	Cryosurgery of rectal tumor: benign (separate procedure)	20	13	1	7,000,000	4,550,000	3,500,000	12,994,000	28,044,000
126	46938	Cryosurgery of rectal tumor: malignant (separate procedure)	30	15	1	10,500,000	5,250,000	3,500,000	12,148,000	31,398,000
127	46940	Curettage or cauterization of anal fissure, including dilation of anal sphincter (separate procedure)	20	13	1	7,000,000	4,550,000	3,500,000	10,647,000	25,697,000
128	46945	Ligation of internal hemorrhoids (separate procedure)	20	13	1	7,000,000	4,550,000	3,500,000	11,383,000	26,433,000
129	47000	Biopsy of liver, percutaneous needle (separate procedure)	15	0	1	5,250,000	0	3,500,000	12,462,000	21,212,000
130	47010	Hepatotomy for drainage of abscess or cyst, one or two stages	65	23	5	22,750,000	8,050,000	3,500,000	53,602,000	87,902,000
131	47130	Hepatectomy: total right lobectomy	200	80	6	70,000,000	28,000,000	3,500,000	86,622,000	188,122,000
132	47425	Choledochotomy or choledochostomy with exploration, drainage, or removal of calculus, with or without cholecystotomy: with or without transduodenal	110	39	7	38,500,000	13,650,000	3,500,000	92,218,000	147,868,000
133	47480	Cholecystotomy or cholecystostomy with exploration, drainage, or removal of calculus (separate procedure)	55	20	3	19,250,000	7,000,000	3,500,000	41,044,000	70,794,000
134	47600	Cholecystectomy: with or without cholangiography, any method	80	28	3	28,000,000	9,800,000	3,500,000	42,696,000	83,996,000
135	47610	Cholecystectomy: with exploration of common duct	110	39	7	38,500,000	13,650,000	3,500,000	80,616,000	136,266,000
136	48100	Biopsy of pancreas (separate procedure)	70	25	3	24,500,000	8,750,000	3,500,000	37,782,000	74,532,000
137	48145	Pancreatectomy, distal subtotal, with or without splenectomy: with or without pancreaticojejunostomy	130	46	7	45,500,000	16,100,000	3,500,000	92,001,000	157,101,000
138	48180	Pancreaticojejunostomy, side-to-side anastomosis (Puestow type operation)	120	42	7	42,000,000	14,700,000	3,500,000	102,865,000	163,065,000
139	49000	Exploratory laparatomy, exploratory celiotomy, with or without biopsy (separate	80	28	5	28,000,000	9,800,000	3,500,000	55,390,000	96,690,000
140	49002	Reopening of recent laparatomy (separate procedure)	70	25	4	24,500,000	8,750,000	3,500,000	41,932,000	78,682,000
141	49020	Drainage of peritoneal abscess or localizd peritonitis, transabdominal (separate procedure)	70	25	7	24,500,000	8,750,000	3,500,000	75,865,000	112,615,000
142	49180	Biopsy, abdominal or retroperitoneal mass, percutaneous needle	15	0	1	5,250,000	0	0	11,533,000	16,783,000
143	49496	Repair initial inguinal hernia, under age 5 years, with or without hydrocelectomy	55	20	1	19,250,000	7,000,000	3,500,000	18,249,000	47,999,000
144	49507	Repair inguinal hernia, age 5 years or over, initial, recurrent, or sliding, with or without prosthesis, with or without hydrocelectomy	70	24	1	24,500,000	8,400,000	3,500,000	21,757,000	58,157,000
145	49550	Repair femoral, umbilical, or lumbar hernia, any age, initial	55	18	1	19,250,000	6,300,000	3,500,000	18,441,000	47,491,000
146	49553	Repair femoral, umbilical, or lumbar hernia, any age, recurrent, with or without prosthesis	70	24	1	24,500,000	8,400,000	3,500,000	23,040,000	59,440,000

		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
147	49560	Repair incisional (abdominal) hernia, reducible, with or without prosthesis: initial separate procedure)	70	24	1	24,500,000	8,400,000	3,500,000	26,262,000	62,662,000
148	45378	Colonoscopy, fiberoptic, beyond splenic flexure: diagnostic	40	16	1	14,000,000	5,600,000	0	8,326,000	27,926,000
149	43235	Upper gastrointestinal endoscopy (esophagus, stomach, and either the duodenum and/or jejunum as appropriate): diagnostic (separate procedure)	25	0	1	8,750,000	0	0	6,688,000	15,438,000

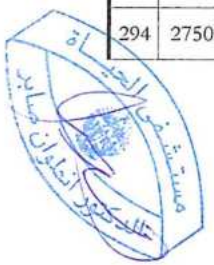
		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
FEMALE GENITAL SYSTEM										
150	56605	Biopsy of vulva or perineum (separate procedure)	10	0	1	3,500,000	0	3,500,000	8,434,000	15,434,000
151	57000	Colpotomy: with exploration or drainage of pelvic abscess	20	12	3	7,000,000	4,200,000	3,500,000	20,338,000	35,038,000
152	57110	Vaginectomy, complete removal of vagina	45	17	1	15,750,000	5,950,000	3,500,000	26,221,000	51,421,000
153	57135	Excision of vaginal cyst or tumor	20	12	1	7,000,000	4,200,000	3,500,000	12,256,000	26,956,000
154	57200	Colporrhaphy: suture of injury of vagina (non obstetrical)	30	14	1	10,500,000	4,900,000	3,500,000	14,659,000	33,559,000
155	57240	Anterior colporrhaphy, repair of cystocele with or without repair of urethrocele (separate procedure)	40	16	1	14,000,000	5,600,000	3,500,000	15,478,000	38,578,000
156	57250	Posterior colporrhaphy, repair of rectocele with or without perineorrhaphy (separate procedure)	35	15	1	12,250,000	5,250,000	3,500,000	13,498,000	34,498,000
157	57265	Combined anteroposterior colporrhaphy: with or without enterocele repair (separate procedure)	55	19	1	19,250,000	6,650,000	3,500,000	22,945,000	52,345,000
158	57280	Colpopexy, abdominal approach	55	19	1	19,250,000	6,650,000	3,500,000	20,815,000	50,215,000
159	57282	Sacrospinous ligament fixation for prolapse of vagina following hysterectomy (separate procedure)	55	19	1	19,250,000	6,650,000	3,500,000	20,815,000	50,215,000
160	57310	Closure of urethrovaginal fistula: any method	50	18	2	17,500,000	6,300,000	3,500,000	23,559,000	50,859,000
161	57452	Colposcopy (vaginoscopy): (separate procedure)	10	0	1	3,500,000	0	0	8,326,000	11,826,000
162	57454	Colposcopy: with biopsies, or biopsy of the cervix (separate procedure)	10	0	1	3,500,000	0	0	9,609,000	13,109,000
163	57460	Colposcopy: with loop electrosurgical excision(s) of the cervix (LEEP) (separate	20	12	1	7,000,000	4,200,000	3,500,000	12,285,000	26,985,000
164	57500	Cervix, biopsy, single or multiple, or local excision of lesion, with or without fulguration (separate procedure)	10	0	1	3,500,000	0	0	8,926,000	12,426,000
165	57505	Endocervical curettage (not done as part of a dilation and curettage) (separate procedure)	10	0	1	3,500,000	0	3,500,000	9,253,000	16,253,000
166	57510	Cauterization of cervix: electro, thermal, cryo, or laser ablation (separate procedure)	15	0	1	5,250,000	0	0	9,376,000	14,626,000
167	57700	Cerclage of uterine cervix, non obstetrical	25	13	1	8,750,000	4,550,000	3,500,000	13,431,000	30,231,000
168	58150	Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(ies)	90	30	6	31,500,000	10,500,000	3,500,000	69,478,000	114,978,000
169	58200	Total abdominal hysterectomy, including partial vaginectomy, with para-aortic and pelvic lymph node sampling, with or without removal of tube(s), with or without removal of ovary(ies)	130	43	6	45,500,000	15,050,000	3,500,000	104,340,000	168,390,000
170	58240	Pelvic exenteration for gynecologic malignancy (total abdominal hysterectomy, removal of bladder, ureteral transplantations and/or abdominoperineal resection of rectum and colon and colostomy	210	73	10	73,500,000	25,550,000	3,500,000	137,427,000	239,977,000
171	58267	Vaginal hysterectomy: with colpo-urethrocystopexy (Marshall-Marchetti-Krantz or Pereyra type, with/without endoscopic control)	100	33	6	35,000,000	11,550,000	3,500,000	67,431,000	117,481,000
172	58275	Vaginal hysterectomy, with total or partial colpectomy	110	36	6	38,500,000	12,600,000	3,500,000	71,389,000	125,989,000
173	58520	Hysterorrhaphy, repair or ruptured uterus (non obstetrical)	55	19	4	19,250,000	6,650,000	3,500,000	44,293,000	73,693,000
174	58700	Salpingectomy, complete or partial, unilateral or bilateral (separate procedure)	40	16	1	14,000,000	5,600,000	3,500,000	17,826,000	40,926,000
175	58800	Drainage of ovarian cyst(s), unilateral or bilateral: vaginal approach	25	13	1	8,750,000	4,550,000	3,500,000	14,236,000	31,036,000

		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
176	58805	Drainage of ovarian cyst(s), unilateral or bilateral: abdominal approach	40	16	1	14,000,000	5,600,000	3,500,000	20,092,000	43,192,000
177	58900	Biopsy of ovary, unilateral or bilateral	45	18	1	15,750,000	6,300,000	3,500,000	17,103,000	42,653,000
178	59300	Episiotomy or vaginal repair only, by other than attending physician	15	12	1	5,250,000	4,200,000	3,500,000	8,721,000	21,671,000
179	59320	Cerclage of cervix, during pregnancy: vaginal	20	12	1	7,000,000	4,200,000	3,500,000	10,728,000	25,428,000
180	59325	Cerclage of cervix , during pregnancy: abdominal	40	16	1	14,000,000	5,600,000	3,500,000	18,781,000	41,881,000
181	59100	Hysteretomy, abdominal (eg, for removal of hydatiform mole, abortion)	60	20	4	21,000,000	7,000,000	3,500,000	44,526,000	76,026,000
182	59151	Laparoscopic treatment of ectopic pregnancy: with or without salpingectomy and/or oophorectomy	60	20	1	21,000,000	7,000,000	3,500,000	25,716,000	57,216,000
183	59350	Hysterorrhaphy of ruptured uterus	45	17	4	15,750,000	5,950,000	3,500,000	43,365,000	68,565,000
184	59410	Vaginal delivery only (with or without episiotomy and/or forceps) including postpartum care	60	0	1	21,000,000	0	3,500,000	17,199,000	41,699,000
185	59515	Cesarean delivery including postpartum care, with or without hysterectomy	80	26	4	28,000,000	9,100,000	3,500,000	50,232,000	90,832,000
186	59840	Induced abortion, by dilation and curettage	20	12	1	7,000,000	4,200,000	3,500,000	11,329,000	26,029,000
		MALE GENITAL SYSTEM								
187	54150	Circumcision, using clamp or other device: newborn	10	0	1	3,500,000	0	0	9,418,000	12,918,000
188	54161	Circumcision, surgical excision other than clamp, device, or dorsal slit: except newborn	25	13	1	8,750,000	4,550,000	3,500,000	13,281,000	30,081,000
189	54322	One stage distal hypospadias repair (with or without chordee or circumcision): with simple meatal advancement (eg, Magpi, V-flap) or with urethroplasty by local skin flaps	80	26	1	28,000,000	9,100,000	3,500,000	22,713,000	63,313,000
190	54500	Biopsy of testis: needle (separate procedure)	10	0	1	3,500,000	0	3,500,000	9,282,000	16,282,000
191	54520	Orchiectomy: simple (including subcapsular), with or without testicular prosthesis, scrotal or inguinal approach	40	16	1	14,000,000	5,600,000	3,500,000	17,116,000	40,216,000
192	54530	Orchiectomy, radical, for tumor: any approach	60	20	3	21,000,000	7,000,000	3,500,000	37,537,000	69,037,000
193	54640	Orchiopexy, any type, with or without hernia repair	60	20	1	21,000,000	7,000,000	3,500,000	19,164,000	50,664,000
194	54700	Incision and drainage of epididymis, testis, and/or scrotal space (eg, abscess or	25	13	1	8,750,000	4,550,000	3,500,000	11,860,000	28,660,000
195	55040	Excision of hydrocele: unilateral	35	15	1	12,250,000	5,250,000	3,500,000	15,819,000	36,819,000
196	55700	Biopsy, prostate: needle or punch, single or multiple, any approach	15	0	1	5,250,000	0	0	9,555,000	14,805,000
197	55705	Biopsy, prostate: incisional, any approach	30	14	1	10,500,000	4,900,000	3,500,000	14,986,000	33,886,000
198	55720	Prostatotomy, external drainage of prostatic abscess, any approach	40	16	1	14,000,000	5,600,000	3,500,000	17,389,000	40,489,000
199	55801	Prostatectomy, perineal, subtotal (including control of postoperative bleeding, vasectomy, meatotomy, urethralcalibration and/or dilation, and internal urethrotomy)	90	30	6	31,500,000	10,500,000	3,500,000	72,754,000	118,254,000
		INTEGUMENTARY SYSTEM								
200	11770	Excision of pilonidal cyst or sinus	40	15	1	14,000,000	5,250,000	3,500,000	17,143,000	39,893,000
201	19020	Mastotomy with exploration and drainage of abscess, deep	20	12	1	7,000,000	4,200,000	3,500,000	9,799,000	24,499,000
202	19100	Biopsy of breast: needle aspiration (separate procedure)	10	0	1	3,500,000	0	0	9,145,000	12,645,000
203	19140	Mastectomy for gynecomastia	40	15	1	14,000,000	5,250,000	3,500,000	17,416,000	40,166,000
204	19160	Mastectomy, partial, for excision of cyst or tumor	40	15	1	14,000,000	5,250,000	3,500,000	19,081,000	41,831,000
205	19162	Mastectomy, partial: with axillary lymphadenectomy	100	33	1	35,000,000	11,550,000	3,500,000	40,567,000	90,617,000
206	19180	Mastectomy, simple, complete	60	20	1	21,000,000	7,000,000	3,500,000	24,678,000	56,178,000
207	19200	Mastectomy, radical, including pectoral muscles, axillary lymph nodes	100	33	5	35,000,000	11,550,000	3,500,000	70,132,000	120,182,000

		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
		MUSCULOSKELETAL SYSTEM								
208	20900	Bone graft, any donor area	35	14	1	12,250,000	4,900,000	3,500,000	16,693,000	37,343,000
209	20920	Fascia lata graft	35	14	1	12,250,000	4,900,000	3,500,000	14,673,000	35,323,000
210	21245	Reconstruction of mandible or maxilla, subperiosteal implant	75	27	2	26,250,000	9,450,000	3,500,000	30,070,000	69,270,000
211	21315	Closed treatment, nasal bone or septum fracture: with or without stabilization	20	12	1	7,000,000	4,200,000	3,500,000	15,942,000	30,642,000
212	21338	Open treatment of nasoethmoid fracture: with or without external fixation	50	18	1	17,500,000	6,300,000	3,500,000	18,018,000	45,318,000
213	21445	Open treatment of mandibular or maxillary alveolar ridge fracture (separate procedure)	35	16	2	12,250,000	5,600,000	3,500,000	35,284,000	56,634,000
214	21462	Open treatment of closed or open mandibular fracture: with or without interdental fixation	60	21	2	21,000,000	7,350,000	3,500,000	30,712,000	62,562,000
215	21465	Open treatment of mandibular condylar fracture	65	22	2	22,750,000	7,700,000	3,500,000	32,691,000	66,641,000
216	21470	Open treatment of complicated mandibular fracture by multiple surgical approaches, including internal fixation, interdental fixation, and/or wiring of dentures or splints	100	35	3	35,000,000	12,250,000	3,500,000	43,351,000	94,101,000
217	21805	Open treatment of rib fracture: without fixation, each	15	12	1	5,250,000	4,200,000	3,500,000	10,441,000	23,391,000
218	21810	Treatment of rib fracture: requiring external fixation ("flail chest")	35	15	1	12,250,000	5,250,000	3,500,000	14,536,000	35,536,000
219	22315	Closed treatment of vertebral body fracture and/or dislocation, with or without anesthesia, by manipulation or traction, each	50	18	2	17,500,000	6,300,000	3,500,000	25,525,000	52,825,000
220	22505	Spine manipulation requiring anesthesia, any region	15	12	2	5,250,000	4,200,000	3,500,000	18,385,000	31,335,000
221	22554	Arthrodesis, anterior interbody technique: cervical below C2, with bone graft (separate procedure)	120	40	8	42,000,000	14,000,000	3,500,000	92,137,000	151,637,000
222	22558	Arthrodesis, anterior interbody technique: lumbar, with bone graft (separate procedure)	150	50	8	52,500,000	17,500,000	3,500,000	110,865,000	184,365,000
223	22585	Arthrodesis, anterior or anterolateral, each additional interspace (list separately in addition to single level arthrodesis)	40	16	8	14,000,000	5,600,000	3,500,000	86,977,000	110,077,000
224	22610	Arthrodesis, posterior or posterolateral technique, with local bone or bone allograft and/or internal fixation: thoracic or lumbar (separate procedure)	135	45	8	47,250,000	15,750,000	3,500,000	89,611,000	156,111,000
225	23450	Capsulorrhaphy for recurrent dislocation of shoulder, anterior or posterior, any	85	28	3	29,750,000	9,800,000	3,500,000	49,890,000	92,940,000
226	23505	Closed treatment of clavicular fracture: with manipulation	20	12	1	7,000,000	4,200,000	3,500,000	11,056,000	25,756,000
227	23515	Open treatment of clavicular fracture, with or without internal or external skeletal fixation	50	18	1	17,500,000	6,300,000	3,500,000	19,437,000	46,737,000
228	23575	Closed treatment of scapular fracture: with manipulation, with or without skeletal traction (with or without shoulder joint involvement)	20	12	1	7,000,000	4,200,000	3,500,000	11,329,000	26,029,000
229	23605	Closed treatment of proximal humeral (surgical or anatomical neck) fracture: with manipulation, with or without skeletal traction	20	12	1	7,000,000	4,200,000	3,500,000	13,840,000	28,540,000
230	23660	Open treatment of acute shoulder dislocation	40	16	1	14,000,000	5,600,000	3,500,000	48,238,000	71,338,000
231	23665	Closed treatment of shoulder dislocation, with fracture of greater tuberosity, with manipulation	20	12	1	7,000,000	4,200,000	3,500,000	12,093,000	26,793,000
232	23700	Manipulation under anesthesia, shoulder joint, including application of fixation apparatus (dislocation excluded)	20	12	1	7,000,000	4,200,000	3,500,000	12,093,000	26,793,000
233	24102	Arthrotomy, elbow: for synovectomy	50	18	1	17,500,000	6,300,000	3,500,000	18,291,000	45,591,000
234	24505	Closed treatment of humeral shaft fracture: with manipulation, with or without skeletal traction	35	15	1	12,250,000	5,250,000	3,500,000	17,457,000	38,457,000
235	24516	Open treatment of humeral shaft fracture, with insertion of intramedullary implant, with or without cerclage and/or locking screws	75	25	4	26,250,000	8,750,000	3,500,000	62,148,000	100,648,000

		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
236	24600	Treatment of closed elbow dislocation	35	15	1	12,250,000	5,250,000	3,500,000	17,430,000	38,430,000
237	24615	Open treatment of acute or chronic elbow dislocation	50	18	1	17,500,000	6,300,000	3,500,000	18,291,000	45,591,000
238	24655	Closed treatment of radial head or neck fracture: with manipulation	35	15	1	12,250,000	5,250,000	3,500,000	14,304,000	35,304,000
239	24675	Closed treatment of ulnar fracture, proximal end (olecranon process): with manipulation	35	15	1	12,250,000	5,250,000	3,500,000	14,304,000	35,304,000
240	25105	Arthrotomy, wrist joint: for synovectomy	45	15	1	15,750,000	5,250,000	3,500,000	18,385,000	42,885,000
241	25505	Closed treatment of radial shaft fracture: with manipulation	30	14	1	10,500,000	4,900,000	3,500,000	14,250,000	33,150,000
242	25515	Open treatment of radial shaft fracture: with/without internal or external fixation	60	20	1	21,000,000	7,000,000	3,500,000	30,357,000	61,857,000
243	25535	Closed treatment of ulnar shaft fracture: with manipulation	25	13	1	8,750,000	4,550,000	3,500,000	14,236,000	31,036,000
244	25545	Open treatment of ulnar shaft fracture: with/without internal or external fixation	60	20	1	21,000,000	7,000,000	3,500,000	62,844,000	94,344,000
245	25565	Closed treatment of radial and ulnar shaft fractures: with manipulation	35	15	1	12,250,000	5,250,000	3,500,000	14,590,000	35,590,000
246	25574	Open treatment of radial and ulnar shaft fractures, with internal or external fixation of radius or	35	15	1	12,250,000	5,250,000	3,500,000	19,068,000	40,068,000
247	25575	Open treatment of radial and ulnar shaft fractures, with internal or external fixation: of radius and ulna	70	23	3	24,500,000	8,050,000	3,500,000	43,570,000	79,620,000
248	25620	Open treatment of distal radial fracture, or epiphyseal separation, with or without fracture of ulnar styloid, with or without internal or external fixation	60	20	3	21,000,000	7,000,000	3,500,000	34,125,000	65,625,000
249	25670	Open treatment of radiocarpal or intercarpal dislocation, one or more bones	45	15	1	15,750,000	5,250,000	3,500,000	18,412,000	42,912,000
250	25675	Closed treatment of distal radioulnar dislocation with manipulation	25	13	1	8,750,000	4,550,000	3,500,000	11,724,000	28,524,000
251	25800	Arthrodesis, wrist joint (including radiocarpal and/or ulnocarpal fusion): without bone graft (separate procedure)	70	23	1	24,500,000	8,050,000	3,500,000	20,938,000	56,988,000
252	26025	Drainage of palmar bursa	30	14	1	10,500,000	4,900,000	3,500,000	13,650,000	32,550,000
253	26040	Fasciotomy, palmar, for Dupuytren's contracture: closed (subcutaneous)	35	15	1	12,250,000	5,250,000	3,500,000	16,501,000	37,501,000
254	26100	Arthrotomy for synovial biopsy: carpometacarpal or metacarpophalangeal or interphalangeal joint	25	12	1	8,750,000	4,200,000	3,500,000	17,949,000	34,399,000
255	26499	Correction claw finger, other methods	60	20	1	21,000,000	7,000,000	3,500,000	19,792,000	51,292,000
256	26605	Closed tretament of metacarpal fracture, single: with manipulation, each bone	25	0	1	8,750,000	0	3,500,000	11,943,000	24,193,000
257	26615	Open treatment of metacarpal fracture, single, with or without internal or external fixation, each bone	40	13	1	14,000,000	4,550,000	3,500,000	15,288,000	37,338,000
258	26735	Open treatment of phalangeal shaft fracture, proximal or middle phalanx, finger or thumb, with or without internal or external fixation, each	40	13	1	14,000,000	4,550,000	3,500,000	18,754,000	40,804,000
259	26785	Open treatment of interphalangeal joint dislocation, with or without internal or external fixation, single	30	12	1	10,500,000	4,200,000	3,500,000	15,724,000	33,924,000
260	27125	Partial hip replacement, prosthesis (eg, femoral stem prosthesis, bipolar arthroplasty)	105	35	6	36,750,000	12,250,000	3,500,000	77,845,000	130,345,000
261	27130	Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip replacement), with or without autograft or allograft	150	50	6	52,500,000	17,500,000	3,500,000	94,812,000	168,312,000
262	27235	Percutaneous skeletal fixation of femoral fracture, proximal end, neck, undisplaced, mildly displaced or impacted fracture	70	23	1	24,500,000	8,050,000	3,500,000	26,344,000	62,394,000
263	27236	Open treatment of femoral fracture, proximal end, neck, internal fixation or prosthetic replacement (direct fracture exposure)	95	32	6	33,250,000	11,200,000	3,500,000	101,296,000	149,246,000
264	27240	Closed treatment of intertrochanteric, pertrochanteric, or subtrochanteric femoral fracture, with manipulation: with or without skin or skeletal traction	50	16	3	17,500,000	5,600,000	3,500,000	30,111,000	56,711,000

		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
265	27244	Open treatment of intertrochanteric, pertrochanteric, or subtrochanteric femoral fracture: with plate/screw type implant, with or without cerclage	100	33	6	35,000,000	11,550,000	3,500,000	90,826,000	140,876,000
266	27245	Open treatment of intertrochanteric, pertrochanteric or subtrochanteric femoral fracture: with intramedullary implant, with or without interlocking screws and/or cerclage	100	33	1	35,000,000	11,550,000	3,500,000	39,093,000	89,143,000
267	27250	Closed treatment of hip dislocation, traumatic	30	12	3	10,500,000	4,200,000	3,500,000	26,016,000	44,216,000
268	27253	Open treatment of hip dislocation, traumatic, without internal fixation	70	23	1	24,500,000	8,050,000	3,500,000	22,522,000	58,572,000
269	27332	Arthrotomy, knee, for meniscectomy: medial OR lateral	55	18	1	19,250,000	6,300,000	3,500,000	19,041,000	48,091,000
270	27333	Arthrotomy, knee, for meniscectomy: medial AND lateral	60	20	1	21,000,000	7,000,000	3,500,000	20,065,000	51,565,000
271	27335	Arthrotomy, knee, for synovectomy: anterior AND/OR posterior including popliteal area	55	18	1	19,250,000	6,300,000	3,500,000	19,041,000	48,091,000
272	27350	Patellectomy or hemipatellectomy	55	18	1	19,250,000	6,300,000	3,500,000	21,361,000	50,411,000
273	27372	Removal of foreign body, deep, thigh region or knee area	35	12	1	12,250,000	4,200,000	3,500,000	14,646,000	34,596,000
274	27400	Tendon or muscle transfer, hamstrings to femur (Eggers type procedure)	55	18	1	19,250,000	6,300,000	3,500,000	19,041,000	48,091,000
275	27403	Arthrotomy with open meniscus repair	60	20	1	21,000,000	7,000,000	3,500,000	20,529,000	52,029,000
276	27405	Repair, primary, torn ligament and/or capsule, knee: collateral or cruciate	55	18	1	19,250,000	6,300,000	3,500,000	18,549,000	47,599,000
277	27409	Repair, primary, torn ligament and/or capsule, knee: collateral and cruciate	95	31	1	33,250,000	10,850,000	3,500,000	36,759,000	84,359,000
278	27418	Anterior tibial tubercle plasty for chondromalacia patellae (Maquet procedure)	60	20	1	21,000,000	7,000,000	3,500,000	19,573,000	51,073,000
279	27424	Reconstruction for recurrent dislocating patella: with patellectomy	55	18	1	19,250,000	6,300,000	3,500,000	27,067,000	56,117,000
280	27427	Ligamentous reconstruction (augmentation), knee: extra-articular	55	18	1	19,250,000	6,300,000	3,500,000	25,347,000	54,397,000
281	27428	Ligamentous reconstruction (augmentation), knee: intra-articular (open)	75	25	1	26,250,000	8,750,000	3,500,000	26,002,000	64,502,000
282	27435	Capsulotomy, knee, posterior capsular release	55	18	1	19,250,000	6,300,000	3,500,000	23,053,000	52,103,000
283	27438	Arthroplasty, patella: with prosthesis	60	20	1	21,000,000	7,000,000	3,500,000	25,033,000	56,533,000
284	27440	Arthroplasty, knee, tibial plateau	55	18	1	19,250,000	6,300,000	3,500,000	19,914,000	48,964,000
285	27443	Arthroplasty, knee, femoral condyles or tibial plateaus: with or without debridement and partial synovectomy	60	20	3	21,000,000	7,000,000	3,500,000	42,505,000	74,005,000
286	27446	Arthroplasty, knee condyle and plateau: medial OR lateral compartment	95	31	6	33,250,000	10,850,000	3,500,000	91,195,000	138,795,000
287	27447	Arthroplasty, knee condyle and plateau: medial AND lateral compartments with or without patella resurfacing ("total knee replacement")	140	46	6	49,000,000	16,100,000	3,500,000	99,862,000	168,462,000
288	27448	Osteotomy, femur, shaft or supracondylar: without fixation	60	20	1	21,000,000	7,000,000	3,500,000	20,446,000	51,946,000
289	27450	Osteotomy, femur, shaft or supracondylar: with fixation	105	35	1	36,750,000	12,250,000	3,500,000	31,599,000	84,099,000
290	27455	Osteotomy, proximal tibia, including fibular excision or osteotomy (includes correction of genu varus or genu valgus): before or after epiphyseal closure	95	31	1	33,250,000	10,850,000	3,500,000	27,640,000	75,240,000
291	27486	Revision of total knee arthroplasty, with or without allograft: one component	120	40	6	42,000,000	14,000,000	3,500,000	86,268,000	145,768,000
292	27487	Revision of total knee arthroplasty, with or without allograft: all components	160	53	6	56,000,000	18,550,000	3,500,000	82,008,000	160,058,000
293	27488	Removal of knee prosthesis, including "total knee", methyl methacrylate and insertion of spacer, when applicable	95	31	6	33,250,000	10,850,000	3,500,000	85,953,000	133,553,000
294	27502	Closed treatment of femoral shaft fracture: with manipulation, with or without skin or skeletal traction	55	18	3	19,250,000	6,300,000	3,500,000	31,135,000	60,185,000



		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
295	27503	Closed treatment of supracondylar or transcondylar femoral fracture with or without intercondylar extension: with manipulation, with or without skin or skeletal traction	55	18	3	19,250,000	6,300,000	3,500,000	31,135,000	60,185,000
296	27510	Closed treatment of femoral fracture, distal end, medial or lateral condyle: with manipulation	55	18	3	19,250,000	6,300,000	3,500,000	31,135,000	60,185,000
297	27511	Open treatment of femoral supracondylar or transcondylar fracture without intercondylar extension, with internal fixation	85	28	5	29,750,000	9,800,000	3,500,000	58,572,000	101,622,000
298	27514	Open treatment of femoral fracture, distal end, medial or lateral condyle, with or without internal or external fixation	95	31	6	33,250,000	10,850,000	3,500,000	88,875,000	136,475,000
299	27517	Closed treatment of distal femoral epiphyseal separation: with manipulation, with or without skin or skeletal traction	55	18	3	19,250,000	6,300,000	3,500,000	31,135,000	60,185,000
300	27519	Open treatment of distal femoral epiphyseal separation, with or without internal or external fixation	90	30	3	31,500,000	10,500,000	3,500,000	44,034,000	89,534,000
301	27532	Closed treatment of tibial fracture, proximal (plateau): with or without manipulation, with skeletal traction	55	18	3	19,250,000	6,300,000	3,500,000	31,135,000	60,185,000
302	27550	Closed treatnent of knee dislocation	35	12	3	12,250,000	4,200,000	3,500,000	27,040,000	46,990,000
303	27558	Open treatment of knee dislocation with or without internal or external fixation: with primary ligamentous repair, with or without augmentation/reconstruction	100	33	5	35,000,000	11,550,000	3,500,000	77,695,000	127,745,000
304	27560	Closed treatment of patellar dislocation	35	12	3	12,250,000	4,200,000	3,500,000	27,040,000	46,990,000
305	27566	Open treatment of patellar dislocation, with or without partial or total patellectomy	60	20	5	21,000,000	7,000,000	3,500,000	68,550,000	100,050,000
306	27570	Manipulation of knee joint under general anesthesia (includes application of traction or other fixation devices)	15	0	1	5,250,000	0	3,500,000	10,741,000	19,491,000
307	27625	Arthrotomy, ankle, for synovectomy	40	13	1	14,000,000	4,550,000	3,500,000	17,526,000	39,576,000
308	27626	Arthrotomy, ankle, for synovectomy: including tenosynovectomy	60	20	1	21,000,000	7,000,000	3,500,000	21,348,000	52,848,000
309	27652	Repair, primary, open or percutaneous, ruptured Achilles tendon: with or without graft	60	20	1	21,000,000	7,000,000	3,500,000	23,887,000	55,387,000
310	27700	Arthroplasty, ankle	75	25	1	26,250,000	8,750,000	3,500,000	24,037,000	62,537,000
311	27705	Osteotomy: tibia or tibia and fibula	80	26	1	28,000,000	9,100,000	3,500,000	29,701,000	70,301,000
312	27752	Closed treatment of tibial shaft fracture (with or without fibular fracture): with	40	13	4	14,000,000	4,550,000	3,500,000	36,553,000	58,603,000
313	27758	Open treatment of tibial shaft fracture (with or without fibular fracture), with plate/screws, with or without cerclage	75	25	5	26,250,000	8,750,000	3,500,000	75,115,000	113,615,000
314	27781	Closed treatment of proximal or distal fibula or shaft fracture: with manipulation	25	0	4	8,750,000	0	3,500,000	33,483,000	45,733,000
315	27784	Open treatment of proximal or distal fibula or shaft fracture, with or without internal or external fixation	40	13	6	14,000,000	4,550,000	3,500,000	67,567,000	89,617,000
316	27830	Closed treatment of proximal tibiofibular joint dislocation	25	0	4	8,750,000	0	3,500,000	33,483,000	45,733,000
317	27842	Closed treatment of ankle dislocation, with percutaneous skeletal fixation	40	13	4	14,000,000	4,550,000	3,500,000	36,553,000	58,603,000
318	27846	Open treatment of ankle dislocation, with or without percutaneous skeletal fixation: without repair or internal fixation	60	20	6	21,000,000	7,000,000	3,500,000	59,049,000	90,549,000
319	27848	Open treatment of ankle dislocation, with or without percutaneous skeletal fixation: with repair or internal or external fixation	75	25	3	26,250,000	8,750,000	3,500,000	38,833,000	77,333,000
320	27860	Manipulation of ankle under general anesthesia (includes applica ion of traction or other fixation apparatus)	15	0	3	5,250,000	0	3,500,000	23,901,000	32,651,000
321	27870	Arthrodesis, ankle, any method (separate procedure)	90	30	6	31,500,000	10,500,000	3,500,000	68,058,000	113,558,000
322	27871	Arthrodesis, tibiofibular joint, proximal or distal (separate procedure)	60	20	6	21,000,000	7,000,000	3,500,000	71,389,000	102,889,000

		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
323	28020	Arthrotomy, with exploration, drainage or removal of loose or foreign body: intertarsal or tarsometatarsal joint or metatarsophalangeal joint or interphalangeal joint	35	12	1	12,250,000	4,200,000	3,500,000	15,273,000	35,223,000
324	28054	Arthrotomy for synovial biopsy: interphalangeal joint or metatarsophalangeal or intertarsal or tarsometatarsal	25	12	1	8,750,000	4,200,000	3,500,000	13,225,000	29,675,000
325	28070	Synovectomy, intertarsal, tarsometatarsal or metatarsophalangeal joint, each	35	12	1	12,250,000	4,200,000	3,500,000	15,273,000	35,223,000
326	28086	Synovectomy, tendon sheath, foot: flexor or extensor	25	12	1	8,750,000	4,200,000	3,500,000	13,225,000	29,675,000
327	28140	Metatarsectomy	50	16	1	17,500,000	5,600,000	3,500,000	18,427,000	45,027,000
328	28160	Hemiphalangectomy or interphalangeal joint excision, toe, single, each	25	12	1	8,750,000	4,200,000	3,500,000	13,254,000	29,704,000
329	28192	Removal of foreign body, foot: deep	35	12	1	12,250,000	4,200,000	3,500,000	15,082,000	35,032,000
330	28260	Capsulotomy, midfoot: medial release only with or without tendon lengthening (separate procedure)	50	16	1	17,500,000	5,600,000	3,500,000	16,789,000	43,389,000
331	28288	Ostectomy, partial, exostectomy or condylectomy, single, metatarsal head, first through fifth, each metatarsal head	25	12	1	8,750,000	4,200,000	3,500,000	15,109,000	31,559,000
332	28296	Hallux valgus (bunion) correction: with or without metatarsal osteotomy or tendon	55	18	1	19,250,000	6,300,000	3,500,000	36,540,000	65,590,000
333	28406	Closed treatment or percutaneous skeletal fixation of calcaneal fracture: with manipulation	35	12	1	12,250,000	4,200,000	3,500,000	14,317,000	34,267,000
334	28420	Open treatment of closed or open calcaneal fracture, with or without internal or external skeletal fixation: with primary autogenous bone graft (includes obtaining graft)	85	28	1	29,750,000	9,800,000	3,500,000	27,558,000	70,608,000
335	28436	Closed treatment or percutaneous skeletal fixation of talus fracture: with manipulation	25	12	1	8,750,000	4,200,000	3,500,000	13,308,000	29,758,000
336	28445	Open treatment of talus fracture, with or without internal or external fixation	70	23	1	24,500,000	8,050,000	3,500,000	21,484,000	57,534,000
337	28476	Closed treatment or percutaneous skeletal fixation of metatarsal fracture: with	25	12	1	8,750,000	4,200,000	3,500,000	12,762,000	29,212,000
338	28546	Percutaneous skeletal fixation of tarsal bone dislocation other than talotarsal, with manipulation	25	12	1	8,750,000	4,200,000	3,500,000	12,762,000	29,212,000
339	28555	Open treatment of tarsal bone dislocation, with or without internal or external fixation	40	13	1	14,000,000	4,550,000	3,500,000	16,380,000	38,430,000
340	28600	Closed treatment of tarsometatarsal joint dislocation	25	12	1	8,750,000	4,200,000	3,500,000	12,762,000	29,212,000
341	28636	Closed treatment or percutaneous skeletal fixation of metatarsophalangeal joint dislocation, with manipulation	25	12	1	8,750,000	4,200,000	3,500,000	12,762,000	29,212,000
342	28760	Arthrodesis, great toe, interphalangeal joint, with extensor hallucis longus transfer to first metatarsal neck (Jones type procedure) (separate procedure)	50	16	6	17,500,000	5,600,000	3,500,000	58,912,000	85,512,000
343	28800	Amputation, foot: midtarsal or transmetatarsal	50	16	5	17,500,000	5,600,000	3,500,000	48,429,000	75,029,000
344	28810	Amputation, metatarsal, with toe, single	40	13	5	14,000,000	4,550,000	3,500,000	46,410,000	68,460,000
345	28820	Amputation, toe: metatarsophalangeal joint	25	12	5	8,750,000	4,200,000	3,500,000	43,338,000	59,788,000
346	29000	Application of halo type body cast	20	0	1	7,000,000	0	3,500,000	11,383,000	21,883,000
347	29040	Application of body cast, shoulder to hips: including head and/or one or both thighs	20	0	1	7,000,000	0	3,500,000	11,383,000	21,883,000
348	29305	Application of hip spica cast: one leg	15	0	1	5,250,000	0	0	9,295,000	14,545,000
349	29325	Application of hip spica cast: one and one half spica or both legs	20	0	1	7,000,000	0	3,500,000	11,383,000	21,883,000
350	29355	Application of long leg cast (thigh to toes): walking or ambulatory type	10	0	1	3,500,000	0	0	8,271,000	11,771,000

		OPERATION	*K*	*ARE*	*los*	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
351	29800	Arthroscopy, diagnostic: any joint, with or without biopsy, limited debridement, partial synovectoomy, removal of loose or foreign body, lysis and resection of adhesios or lavage and drainage (separate procedure)	40	13	1	14,000,000	4,550,000	3,500,000	20,392,000	42,442,000

		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
		NERVOUS SYSTEM								
352	61500	Craniectomy: with excision of tumor or other bone lesion of skull	130	52	8	45,500,000	18,200,000	3,500,000	187,414,000	254,614,000
353	61543	Craniotomy, trephination, bone flap craniotomy: for partial or subtotal hemispherectomy	145	58	8	50,750,000	20,300,000	3,500,000	155,241,000	229,791,000
354	61548	Hypophysectomy or excision of pitutary tumor, transnasal or transseptal approach, non-	160	64	8	56,000,000	22,400,000	3,500,000	140,076,000	221,976,000
355	61550	Craniectomy for craniostenosis: single or multiple sutures, or frontal or partial bone flap, or bifrontal bone flap	135	52	8	47,250,000	18,200,000	3,500,000	189,393,000	258,343,000
356	62000	Elevation of depressed skull fracture: simple, extradural	80	28	8	28,000,000	9,800,000	3,500,000	176,739,000	218,039,000
357	62194	Replacement or irrigation, subarachnoid/subdural catheter	35	16	6	12,250,000	5,600,000	3,500,000	57,861,000	79,211,000
358	62201	Ventriculocisternostomy, third ventricle: stereotactic method or any method	90	32	10	31,500,000	11,200,000	3,500,000	103,002,000	149,202,000
359	62230	Replacement or revision of CSF shunt, obstructed valve, or distal catheter in shunt	70	25	4	24,500,000	8,750,000	3,500,000	63,417,000	100,167,000
360	62258	Removal of complete CSF shunt system: with replacement by similar or other shunt at same operation	110	39	10	38,500,000	13,650,000	3,500,000	110,919,000	166,569,000
361	62269	Biopsy of spinal cord, percutaneous needle	30	0	1	10,500,000	0	3,500,000	18,099,000	32,099,000
362	62270	Spinal puncture, diagnostic	10	0	1	3,500,000	0	3,500,000	6,688,000	13,688,000
363	63001	Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or diskectomy, one or two vertebral segments: cervical, thoracic, lumbar or sacral	110	39	5	38,500,000	13,650,000	3,500,000	89,898,000	145,548,000
364	63046	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral) with decompression of spinal cord, cauda equina and/or nerve root(s), single vertebral segment: thoracic or lumbar	110	39	5	38,500,000	13,650,000	3,500,000	89,898,000	145,548,000
365	63075	Diskectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophytectomy: cervical or thoracic , single	135	48	5	47,250,000	16,800,000	3,500,000	96,900,000	164,450,000
366	63650	Percutaneous implantation of neurostimulator electrodes: epidural	45	17	1	15,750,000	5,950,000	3,500,000	15,546,000	40,746,000
367	64722	Decompression of nerve	35	15	1	12,250,000	5,250,000	3,500,000	13,513,000	34,513,000
368	63744	Replacement, irrigation or revision of lumbosubarachnoid shunt	50	19	4	17,500,000	6,650,000	3,500,000	69,832,000	97,482,000
369	64856	Suture of major peripheral nerve, arm or leg: including transposition	95	32	2	33,250,000	11,200,000	3,500,000	32,281,000	80,231,000
370	64861	Suture of brachial or lumbar plexus	135	45	3	47,250,000	15,750,000	3,500,000	47,638,000	114,138,000
		EYE AND OCULAR ADNEXA								
371	65280	Repair of laceration: cornea and/or sclera, perforating, not involving uveal tissue	50	18	1	17,500,000	6,300,000	3,500,000	19,383,000	46,683,000
372	65400	Keratectomy: lamellar, partial (except pterygium)	40	16	1	14,000,000	5,600,000	3,500,000	16,707,000	39,807,000
373	65450	Destruction of lesion of cornea by cryotherapy, photocoagulation or thermo-cauterization	20	12	1	7,000,000	4,200,000	3,500,000	8,790,000	23,490,000
374	65710	Keratoplasty: lamellar	80	26	1	28,000,000	9,100,000	3,500,000	25,935,000	66,535,000
375	65771	Radial keratotomy	85	28	1	29,750,000	9,800,000	3,500,000	24,583,000	67,633,000
376	65855	Trabeculoplasty by laser surgery, one or more sessions (defined treatment series)	40	16	1	14,000,000	5,600,000	3,500,000	14,413,000	37,513,000
377	65860	Severing adhesions of anterior segment, laser technique (separate procedure)	30	15	1	10,500,000	5,250,000	3,500,000	10,482,000	29,732,000
378	66220	Repair of scleral staphyloma: without graft	50	18	1	17,500,000	6,300,000	3,500,000	17,799,000	45,099,000
379	66225	Repair of scleral staphyloma: with graft	75	25	1	26,250,000	8,750,000	3,500,000	22,630,000	61,130,000
380	66625	Iridectomy, with corneoscleral or corneal section: peripheral or sector, for glaucoma (separate procedure)	45	17	1	15,750,000	5,950,000	3,500,000	15,834,000	41,034,000
381	66635	Iridectomy, with corneoscleral or corneal section: "optical" (separate procedure)	45	17	1	15,750,000	5,950,000	3,500,000	15,834,000	41,034,000

		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
382	66680	Repair of iris, ciliary body (as for iridodialysis)	45	17	1	15,750,000	5,950,000	3,500,000	15,834,000	41,034,000
383	66700	Ciliary boby destruction: diathermy, cyclophotocoagulation, cryotherapy or cyclodialysis	35	15	1	12,250,000	5,250,000	3,500,000	11,847,000	32,847,000
384	66761	Iridotomy/iridectomy by laser surgery (eg, for glaucoma)	25	13	1	8,750,000	4,550,000	3,500,000	5,241,000	22,041,000
385	66762	Iridoplasty by photocoagulation (eg, for improvement of vision, for widening of anterior chamber angle)	30	14	1	10,500,000	4,900,000	3,500,000	7,234,000	26,134,000
386	66984	Extra- or intracapsular cataract removal with insertion of intraocular lens prosthesis (one stage procedure), manual or mechanical technique	90	32	1	31,500,000	11,200,000	3,500,000	30,849,000	77,049,000
387	66985	Insertion of intraocular lens prosthesis (secondary implant), not associated with concurrent cataract removal, with or without anterior vitrectomy	70	23	1	24,500,000	8,050,000	3,500,000	24,924,000	60,974,000
388	67005	Removal of vitreous, anterior approach (open sky technique or limbal incision): partial, or subtotal removal with mechanical vitrectomy	45	18	1	15,750,000	6,300,000	3,500,000	17,389,000	42,939,000
389	67028	Intravitreal injection of pharmacologic agent (separate procedure)	20	12	1	7,000,000	4,200,000	3,500,000	7,452,000	22,152,000
390	67311	Strabismus surgery: any technique, any number of muscles	60	20	1	21,000,000	7,000,000	3,500,000	24,078,000	55,578,000
391	67515	Injection of therapeutic agent into Tenon's capsule	10	0	1	3,500,000	0	0	8,271,000	11,771,000
392	67700	Blepharotomy, drainage of abscess, eyelid	10	0	1	3,500,000	0	3,500,000	7,425,000	14,425,000
393	67710	Severing of tarsorrhaphy	10	12	1	3,500,000	4,200,000	3,500,000	6,769,000	17,969,000
394	67914	Repair of ectropion: suture or thermocauterization	25	13	1	8,750,000	4,550,000	3,500,000	13,362,000	30,162,000
395	68110	Excision of lesion, conjunctiva	15	0	1	5,250,000	0	3,500,000	11,806,000	20,556,000
396	68130	Excision of lesion, conjunctiva: with adjacent sclera	35	15	1	12,250,000	5,250,000	3,500,000	17,266,000	38,266,000
397	68200	Subconjunctival injection	5	0	1	1,750,000	0	3,500,000	7,521,000	12,771,000
398	68326	Conjunctivoplasty, with or without reconstruction cul-de-sac: with conjunctival graft, extensive rearrangement, or buccal mucous membrane graft (includes obtaining graft)	50	18	1	17,500,000	6,300,000	3,500,000	18,754,000	46,054,000
399	68340	Repair of symblepharon: division of symblepharon with or without insertion of conformer or contact lens	30	14	1	10,500,000	4,900,000	3,500,000	12,679,000	31,579,000
400	68360	Conjunctival flap: bridge or partial	30	14	1	10,500,000	4,900,000	3,500,000	12,679,000	31,579,000
401	68362	Conjunctival flap: total (eg, Gunderson thin flap or purse string flap)	50	18	1	17,500,000	6,300,000	3,500,000	16,707,000	44,007,000
		RESPIRATORY SYSTEM								
402	30140	Submucous resection turbinate, complete or partial	30	14	1	10,500,000	4,900,000	3,500,000	14,386,000	33,286,000
403	30520	Submucous resection of nasal septum	40	16	1	14,000,000	5,600,000	3,500,000	14,250,000	37,350,000
404	30540	Repair choanal atresia: intranasal	60	20	1	21,000,000	7,000,000	3,500,000	21,294,000	52,794,000
405	30801	Cauterization and/or ablation, mucosa of turbinates (separate procedure)	15	0	1	5,250,000	0	3,500,000	10,332,000	19,082,000
406	30901	Control nasal hemorrhage, any method (separate procedure)	15	12	1	5,250,000	4,200,000	3,500,000	13,744,000	26,694,000
407	30920	Ligation arteries: ethmoidal or internal maxillary artery, transantral	55	19	1	19,250,000	6,650,000	3,500,000	21,825,000	51,225,000
408	31020	Sinusotomy, maxillary (antrotomy): intranasal	20	12	1	7,000,000	4,200,000	3,500,000	11,602,000	26,302,000
409	31030	Sinusotomy maxillary (antrotomy): radical (Caldwell-Luc), with or without removal of antrochoanal polyps	40	16	2	14,000,000	5,600,000	3,500,000	24,787,000	47,887,000
410	31040	Pterygomaxillary fossa surgery, any approach	60	20	2	21,000,000	7,000,000	3,500,000	26,016,000	57,516,000
411	31070	Sinusotomy, sphenoid, frontal or intanasal	40	16	1	14,000,000	5,600,000	3,500,000	15,069,000	38,169,000

		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
412	31075	Sinusotomy frontal: transorbital, unilateral (for mucocele or osteoma, Lynch type)	60	20	2	21,000,000	7,000,000	3,500,000	26,016,000	57,516,000
413	31080	Sinusotomy frontal: obliterative or nonbiliterarive	85	28	2	29,750,000	9,800,000	3,500,000	35,913,000	78,963,000
414	31090	Sinusotomy combined, three or more sinuses	75	25	2	26,250,000	8,750,000	3,500,000	32,308,000	70,808,000
415	31200	Ethmoidectomy	50	18	1	17,500,000	6,300,000	3,500,000	21,867,000	49,167,000
416	31300	Laryngotomy (thyrotomy, laryngofissure): with removal of tumor or laryngocele,	70	28	3	24,500,000	9,800,000	3,500,000	39,775,000	77,575,000
417	31360	Laryngectomy: total or subtotal supraglottic, without radical neck dissection	105	42	10	36,750,000	14,700,000	3,500,000	89,721,000	144,671,000
418	31370	Partial laryngectomy (hemilaryngectomy)	100	40	10	35,000,000	14,000,000	3,500,000	87,741,000	140,241,000
419	31400	Arytenoidectomy or arytenoidopexy, external approach	60	24	5	21,000,000	8,400,000	3,500,000	47,965,000	80,865,000
420	31420	Epiglottidectomy	60	24	1	21,000,000	8,400,000	3,500,000	21,375,000	54,275,000
421	31510	Laryngoscopy, direct or indirect, diagnostic with or without biopsy (separate procedure)	15	12	1	5,250,000	4,200,000	0	10,905,000	20,355,000
422	31580	Laryngoplasty other than cricoid split	100	40	1	35,000,000	14,000,000	3,500,000	28,609,000	81,109,000
423	31600	Tracheostomy, (separate procedure)	30	15	5	10,500,000	5,250,000	3,500,000	44,389,000	63,639,000
424	31611	Construction of tracheoesophageal fistula and subsequent insertion of an alaryngeal speech prosthesis (eg, voice button, Blom-Singer prosthesis)	30	15	1	10,500,000	5,250,000	3,500,000	14,469,000	33,719,000
425	31613	Tracheostoma revision (separate procedure)	35	17	1	12,250,000	5,950,000	3,500,000	16,447,000	38,147,000
426	31750	Tracheoplasty: cervical	60	24	7	21,000,000	8,400,000	3,500,000	60,168,000	93,068,000
427	31760	Tracheoplasty: intrathoracic	140	56	7	49,000,000	19,600,000	3,500,000	105,159,000	177,259,000
428	31820	Closure of tracheostomy or tracheal fistula: with or without plastic repair (separate procedure)	30	15	4	10,500,000	5,250,000	3,500,000	46,218,000	65,468,000
429	32035	Thoracostomy: with rib resection for empyema	50	20	7	17,500,000	7,000,000	3,500,000	84,930,000	112,930,000
430	32100	Thoracotomy: with exploration and biopsy, control of hemorrhage or postoperative complications	60	24	7	21,000,000	8,400,000	3,500,000	64,018,000	96,918,000
431	32310	Pleurectomy, parietal (separate procedure)	85	34	7	29,750,000	11,900,000	3,500,000	67,279,000	112,429,000
432	32400	Biopsy, pleura: percutaneous needle, one or more specimens	15	0	1	5,250,000	0	0	11,533,000	16,783,000
433	32405	Biopsy, lung or mediastinum, percutaneous needle	15	0	1	5,250,000	0	0	11,533,000	16,783,000
434	32480	Lobectomy, total or segmental, with or without bronchoplasty or decortication	120	48	7	42,000,000	16,800,000	3,500,000	81,598,000	143,898,000
435	32601	Thoracoscopy, diagnostic, with or without biopsy (separate procedure)	50	20	7	17,500,000	7,000,000	3,500,000	63,882,000	91,882,000
436	32653	Thoracoscopy, surgical: with removal of intrapleural foreign body, fibrin or control of traumatic hemorrhage,	80	32	7	28,000,000	11,200,000	3,500,000	68,085,000	110,785,000
437	32655	Thoracoscopy, surgical: with excision-plication of bullae, including any pleural procedure, with or without parietal pleurectomy	80	32	7	28,000,000	11,200,000	3,500,000	68,085,000	110,785,000
438	32663	Thoracoscopy, surgical: with segmental or total lobectomy, or wedge resection(s) of lung	100	40	7	35,000,000	14,000,000	3,500,000	72,180,000	124,680,000
439	32664	Thoracoscopy, surgical: with thoracic sympathectomy	85	34	7	29,750,000	11,900,000	3,500,000	69,109,000	114,259,000
440	32900	Resection of ribs, extrapleural, all stages	60	24	3	21,000,000	8,400,000	3,500,000	31,885,000	64,785,000
441	32905	Thoracoplasty	150	60	1	52,500,000	21,000,000	3,500,000	42,669,000	119,669,000
442	32960	Pneumothorax, therapeutic	15	12	1	5,250,000	4,200,000	3,500,000	9,295,000	22,245,000

		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
		MEDIASTINUM AND DIAPHRAGM								
443	39200	Excision of mediastinal cyst	80	32	7	28,000,000	11,200,000	3,500,000	69,123,000	111,823,000
444	39220	Excision of mediastinal tumor	100	40	7	35,000,000	14,000,000	3,500,000	80,698,000	133,198,000
445	39400	Mediastinoscopy, with or without biopsy	30	15	1	10,500,000	5,250,000	3,500,000	18,700,000	37,950,000
446	39501	Repair of diaphragmatic laceration, any approach	90	36	5	31,500,000	12,600,000	3,500,000	49,003,000	96,603,000
447	50020	Drainage of perirenal or renal abscess (separate procedure)	70	25	3	24,500,000	8,750,000	3,500,000	31,941,000	68,691,000
		URINARY SYSTEM								
448	50045	Nephrotomy, with exploration	80	28	4	28,000,000	9,800,000	3,500,000	43,297,000	84,597,000
449	50065	Nephrolithotomy: secondary surgical operation for calculus	120	42	6	42,000,000	14,700,000	3,500,000	76,957,000	137,157,000
450	50200	Renal biopsy: percutaneous, by trocar or needle	20	0	1	7,000,000	0	3,500,000	13,704,000	24,204,000
451	50205	Renal biopsy: by surgical exposure of kidney	75	27	1	26,250,000	9,450,000	3,500,000	12,898,000	52,098,000
452	50220	Nephrectomy, including partial ureterectomy, any approach including rib resection	100	35	6	35,000,000	12,250,000	3,500,000	73,900,000	124,650,000
453	50230	Nephrectomy, including partial ureterectomy, any approach including rib resection: radical, with regional lymphadenectomy and/or vena caval thrombectomy	140	50	5	49,000,000	17,500,000	3,500,000	80,206,000	150,206,000
454	50234	Nephrectomy, with total ureterectomy and bladder cuff	140	50	5	49,000,000	17,500,000	3,500,000	78,541,000	148,541,000
455	50240	Nephrectomy, partial	100	35	6	35,000,000	12,250,000	3,500,000	76,740,000	127,490,000
456	50340	Recipient nephrectomy (separate procedure), bilateral	100	35	6	35,000,000	12,250,000	3,500,000	76,740,000	127,490,000
457	50393	Introduction of ureteral catheter or stent into ureter through renal pelvis for drainage and/or injection, percutaneous	25	0	1	8,750,000	0	3,500,000	13,362,000	25,612,000
458	50590	Lithotripsy, extracorporeal shock wave	65	0	1	22,750,000	0	3,500,000	17,266,000	43,516,000
459	50610	Ureterolithotomy	70	25	6	24,500,000	8,750,000	3,500,000	57,820,000	94,570,000
460	50650	Ureterectomy, with bladder cuff (separate procedure)	95	34	6	33,250,000	11,900,000	3,500,000	74,923,000	123,573,000
461	50951	Ureteral endoscopy through established ureterostomy diagnostic or therapeutic	30	0	1	10,500,000	0	3,500,000	16,707,000	30,707,000
462	51020	Cystotomy or cystostomy: with fulguration and/or insertion of radioactive material	25	13	1	8,750,000	4,550,000	3,500,000	12,393,000	29,193,000
463	51045	Cystotomy, with insertion of ureteral catheter or stent (separate procedure)	40	16	1	14,000,000	5,600,000	3,500,000	15,478,000	38,578,000
464	51050	Cystolithotomy, cystotomy with removal of calculus: without vesical neck dissection	40	16	1	14,000,000	5,600,000	3,500,000	20,475,000	43,575,000
465	51060	Transvesical ureterolithotomy	45	17	1	15,750,000	5,950,000	3,500,000	20,542,000	45,742,000
466	51530	Cystotomy: for excision of bladder tumor	75	27	6	26,250,000	9,450,000	3,500,000	64,276,000	103,476,000
467	51575	Cystectomy, complete: with bilateral pelvic lymphadenectomy, including external iliac, hypogastric and obturator nodes	200	70	12	70,000,000	24,500,000	3,500,000	186,294,000	284,294,000
468	51700	Bladder irrigation, simple, lavage and/or irrigation (separate procedure)	5	0	1	1,750,000	0	3,500,000	4,981,000	10,231,000
469	51705	Change of cystostomy tube (separate procedure)	10	0	1	3,500,000	0	3,500,000	8,271,000	15,271,000
470	51785	Electromyography studies (EMG) of anal or urethral sphincter, any technique	10	0	1	3,500,000	0	3,500,000	8,271,000	15,271,000
471	51792	Stimulus evoked response (eg, measurement of bulbocavernous reflex latency time)	10	0	1	3,500,000	0	3,500,000	8,271,000	15,271,000
472	51797	Voiding pressure studies (VP): intra-abdominal voiding pressure (AP) (rectal, gastric, intra-peritoneal)	10	0	1	3,500,000	0	3,500,000	6,006,000	13,006,000
473	51860	Cystorrhaphy, suture of bladder wound, injury or rupture	70	25	4	24,500,000	8,750,000	3,500,000	44,143,000	80,893,000
474	51900	Closure of vesicovaginal fistula	80	26	6	28,000,000	9,100,000	3,500,000	65,301,000	105,901,000
475	52000	Cystourethroscopy diagnostic or therapeutic	25	12	1	8,750,000	4,200,000	3,500,000	14,727,000	31,177,000

		OPERATION	K	ARE	los	Surgeon	Anesthesia	Consultation	Hospital A/B	Total
476	52204	Cystourethroscopy, with biopsy (separate procedure)	25	12	1	8,750,000	4,200,000	3,500,000	15,055,000	31,505,000
477	52214	Cystourethroscopy, with fulguration (including cryosurgery or laser surgery) of trigone, bladder neck, prostatic fossa, urethra, or periurethral glands	25	12	1	8,750,000	4,200,000	3,500,000	13,608,000	30,058,000
478	52277	Cystourethroscopy, with resection of external sphincter (sphincterotomy)	40	16	1	14,000,000	5,600,000	3,500,000	18,099,000	41,199,000
479	52290	Cystourethroscopy: with ureteral meatotomy, unilateral or bilateral (separate procedure)	30	0	1	10,500,000	0	3,500,000	13,977,000	27,977,000
480	52310	Cystourethroscopy, with removal of foreign body, calculus, or ureteral stent from urethra or bladder (separate procedure)	30	14	1	10,500,000	4,900,000	3,500,000	17,608,000	36,508,000
481	52317	Litholapaxy: crushing or fragmentation of calculus by any means in bladder and removal of fragments	50	18	1	17,500,000	6,300,000	3,500,000	20,665,000	47,965,000
482	52320	Cystourethroscopy (including ureteral catheterization): removal or fragmentation of ureteral calculus, with or without manipulation (separate procedure)	40	16	1	14,000,000	5,600,000	3,500,000	27,600,000	50,700,000
483	52332	Cystourethroscopy, with insertion of indwelling ureteral stent (eg, Gibbons or double-J type) (separate procedure)	25	12	1	8,750,000	4,200,000	3,500,000	12,762,000	29,212,000
484	52334	Cystourethroscopy, with insertion of ureteral guide wire through kidney to establish a percutaneous nephrostomy, retrograde (separate procedure)	35	15	1	12,250,000	5,250,000	3,500,000	16,980,000	37,980,000
485	52450	Transurethral incision of prostate	45	17	1	15,750,000	5,950,000	3,500,000	19,000,000	44,200,000
486	52500	Transurethral resection of bladder neck (separate procedure)	50	18	1	17,500,000	6,300,000	3,500,000	20,992,000	48,292,000
487	52510	Transurethral balloon dilation of the prostatic urethra, any method	40	16	1	14,000,000	5,600,000	3,500,000	16,597,000	39,697,000
488	52601	Transurethral resection of prostate including complete vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy	100	33	6	35,000,000	11,550,000	3,500,000	77,313,000	127,363,000
489	52650	Transurethral cryosurgical removal of prostate (postoperative irrigations and aspiration of sloughing tissue included)	70	23	1	24,500,000	8,050,000	3,500,000	24,160,000	60,210,000
490	52700	Transurethral drainage of prostatic abscess	40	16	1	14,000,000	5,600,000	3,500,000	15,478,000	38,578,000
491	53200	Biopsy of urethra	15	12	1	5,250,000	4,200,000	3,500,000	10,851,000	23,801,000
492	53210	Urethrectomy, total, including cystostomy	90	30	1	31,500,000	10,500,000	3,500,000	27,627,000	73,127,000
493	53670	Catheterization, urethra (sonde foley - foley cath)	5	0	1	1,750,000	0	0	5,337,000	7,087,000
		HEMIC AND LYMPHATIC SYSTEMS								
494	38100	Splenectomy	90	31	5	31,500,000	10,850,000	3,500,000	65,929,000	111,779,000
495	38500	Biopsy or excision of lymph node(s): superficial (separate procedure)	20	12	1	7,000,000	4,200,000	3,500,000	12,912,000	27,612,000
496	38510	Biopsy or excision of lymph node(s): deep (cervical with or without excision of scalene fat pad, or axillary nodes) (separate procedure)	30	14	1	10,500,000	4,900,000	3,500,000	14,959,000	33,859,000
		ENDOCRINE SYSTEM								
497	60220	Total thyroid lobectomy, unilateral (hemithyroidectomy)	90	30	3	31,500,000	10,500,000	3,500,000	44,662,000	90,162,000
498	60225	Total thyroid lobectomy, unilateral: with contralateral subtotal lobectomy, including	110	36	3	38,500,000	12,600,000	3,500,000	47,092,000	101,692,000
499	60240	Thyroidectomy, total or complete	120	40	4	42,000,000	14,000,000	3,500,000	55,063,000	114,563,000
500	60500	Parathyroidectomy	105	35	4	36,750,000	12,250,000	3,500,000	51,828,000	104,328,000