

SECTION K:

NEUROSURGERY

		Fee	Class	Anae
	Visits			
5K	Initial Assessment -- of a specific condition includes: pertinent family history, patient history, history of presenting complaint, functional enquiry, examination of affected part(s) or system(s), diagnosis, assessment, necessary treatment, advice to the patient and record of service provided	\$176.00		
7K	Follow-up assessment -- includes: history review, functional enquiry, examination, reassessment, necessary treatment, advice to the patient and record of service provided	\$104.00		
8K	Consultation -- spinal, complex -- at least 30 minutes documented duration including history, physical, review of imaging and recommendations to referring physician -- includes traumatic, tumor, infection, degenerative -- can be billed by all neurosurgeon specialists -- can also be billed by physicians who perform spinal instrumentation and fusion procedures	\$326.00		
10K	Consultation -- spinal, routine -- less than 30 minutes documented duration including history, physical, review of imaging and recommendations to referring physician -- can be used for spine referral -- can be billed by all neurosurgeons and orthopaedic surgeons	\$214.00		
9K	Consultation -- includes all visits necessary, history and examination, review of all laboratory and/or other data and written submission of the consultant's opinion and recommendations to the referring doctor	\$244.00		
11K	-- repeat A formal consultation for the same or related condition repeated within 90 days by the same physician. It should not be used for routine follow-up of the patient for which either service code '5' "partial assessment or subsequent review" or service code '7' "follow-up assessment" are appropriate.	\$106.00		
14K	Follow-up visit, spinal, complex -- billable for those patients previously billed as initial spine consult, complex -- billable by physicians who have written prior approval by the SMA Tariff Committee	\$122.00		

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-- can be billed by all neurosurgeon specialists
 -- can also be billed by physicians who perform spinal instrumentation and fusion procedures

15K Follow-up visit, spinal, routine \$93.40
 -- can be billed by all neurosurgeons and orthopaedic surgeons

Hospital Care

(Payable on day of admission)

25K -- first 10 days, per day \$68.00 *
 26K -- 11-20 days, per day \$60.00 *
 27K -- 21-30 days, per day \$60.00 *
 28K -- thereafter, per day \$60.00 *

Note: for hospital discharge by physician, see code 725A, Section A

Procedures

Additional payments for diagnostic service excluding ECG's, 0, 10 or 42 day operative procedures performed on patients under one (1) year of age are automatically calculated and paid as explained in Section A, Paediatric Age Supplement

31K Subdural taps through fontanelle: \$77.00 * D L
 initial or repeat
 32K Ventricular puncture through previous \$129.50 D M
 burr or fontanelle
 35K Implantation of an intracranial monitor for \$481.00 0 L
 measuring intracranial pressure
 36K Double blind morphine pain study \$227.90 D

Intracranial Procedures -- Non-traumatic

50K Operative management of brain abscess \$2,300.50 42 H
 51K Sub-occipital craniectomy for tractotomy \$2,473.80 42 H
 or cranial nerve section
 253K Micro surgical decompression of \$3,400.00 42 M
 cranial nerve
 66K Percutaneous thermocoagulation (Rhizotomy) \$1,421.00 42 L
 of trigeminal nerve or ganglion
 Craniotomy and orbital decompression
 55K -- unilateral \$2,300.50 42 H
 56K -- bilateral \$2,731.70 42 H
 57K Cerebellar or cerebral tumor -- \$4,223.00 42 H
 excision
 58K Cerebellar or cerebral arteriovenous \$5,000.00 42 H
 malformation or aneurysm -- excision or obliteration
 59K Stereotactic procedures - framed or frameless to \$2,675.00 42 H
 obtain deep tumor biopsy, localization and guidance during craniotomy for tumor excision
 60K Cortical excision for epilepsy, \$2,675.00 42 H
 hypophysectomy or excision of choroid plexus
 61K Intra-operative electrophysiological \$642.00 42
 monitoring and/or stimulation
 -- add to any intracranial procedure

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		Fee	Class	Anae
	Excision of			
62K	-- osteomyelitis of skull	\$1,489.40	42	M
63K	-- skull tumor	\$1,489.40	42	M
64K	-- skull tumor with immediate cranioplasty	\$1,489.40	42	M
65K	Extra-axial brain tumor (microdissection, CO2 laser, ultrasonic aspirator)	\$5,626.00	42	H
80K	Ventriculocisternostomy	\$1,599.70	42	M
81K	Repair of encephalocele	\$1,759.10	42	H
82K	Shunts for hydrocephalus -- any type	\$2,282.00	42	M
83K	-- revision during the same hospital admission as original procedure	\$1,412.40	42	M
84K	-- revision - independent procedure upper end	\$1,883.20	42	M
85K	-- lower end	\$1,002.60	42	M
86K	Removal of ventriculo peritoneal shunt without simultaneous revision	\$424.80	42	L
	Craniectomy for craniostenosis			
90K	-- single suture	\$2,140.00	42	M
91K	-- multiple sutures	\$2,140.00	42	M
92K	Lateral canthal advancement -- unilateral	\$2,041.60	42	M
93K	-- bilateral	\$2,595.80	42	M
	Burr holes			
100K	-- exploratory with or without biopsy	\$524.30	42	M
101K	-- with external ventricular drainage	\$806.80	42	M
102K	-- with C. T. guided biopsy	\$769.30	42	M
103K	Sub-temporal decompression	\$958.70	42	M
106K	Extracranial -- intracranial bypass	\$3,383.30	42	H
	Procedures for Traumatic Intracranial Lesions			
	Evacuation of haematoma			
113K	-- via burr holes	\$1,974.00	42	M
114K	-- via craniotomy	\$2,579.00	42	H
116K	Elevation of simple depressed skull fracture	\$1,407.00	42	M
117K	Compound depressed skull fracture with debridement of brain and repair of dura	\$2,996.00	42	H
118K	Compound depressed fracture with sinus involvement or reconstruction of the orbit	\$1,637.10	42	M
119K	Cranioplasty for skull defect	\$1,664.00	42	M
121K	Craniotomy for cerebrospinal fluid rhinorrhea	\$2,027.00	42	H
122K	Intracranial duraplasty -- for a deficiency greater than 2 cm. diameter -- add to intracranial procedure	\$338.10	42	
	Peripheral Nerve Lesions			
156K	Biopsy of sural nerve	\$408.00	D	L
157K	Removal of tumor -- major peripheral nerve (e.g. median or ulna)	\$1,020.00	42	L

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	Decompression of entrapment syndrome			
158K	-- median nerve	\$655.00	42	L
159K	-- others	\$1,020.00	42	L
160K	Section or crushing of nerve	\$282.50	42	L
161K	Neuroma excision	\$714.00	42	L
162K	Exploration of peripheral nerve injury, or neurolysis	\$881.00	42	L
163K	Nerve suture (other than digital)	\$1,230.00	42	L
164K	Nerve suture with special techniques to overcome gap	\$1,430.00	42	L
165K	Digital nerve suture	\$820.00	42	L
166K	Exploration of brachial or lumbar plexus with or without suture	\$1,070.00	42	L
167K	Nerve anastomosis for intracranial nerve injury	\$1,070.00	42	L
368K	Secondary or delayed nerve repair -- one month post injury, add	\$310.00	42	L
468K	Fascicular instead of epineural nerve repair, add	\$535.00	42	M
	Nerve grafting procedures			
168K	-- single cable	\$978.00	42	L
268K	-- multiple cables	\$1,430.00	42	L
169K	Transposition of ulnar nerve	\$922.00	42	L
170K	Extracranial anastomosis for facial nerve lesion -- hypoglossal accessory, etc.	\$1,020.80	42	L
171K	Radiofrequency spinal rhizotomy	\$406.60	0	L
	Facial nerve - microsurgical graft			
172K	-- neurosurgeon	\$1,020.80	42	L
173K	-- general surgeon	\$614.00	42	L
174K	Selective dorsal rhizotomy for spasticity	\$2,369.00	42	M
175K	DREZ procedure for intractable pain	\$1,691.70	42	M
	Vegetative Nervous System			
	Cervical sympathectomy			
180K	-- unilateral	\$1,002.60	42	M
181K	-- bilateral	\$1,174.90	42	M
	Cervico-thoracic sympathectomy			
182K	-- unilateral	\$886.00	42	H
183K	-- bilateral	\$1,065.70	42	H
	Lumbar sympathectomy			
184K	-- unilateral	\$1,020.80	42	M
185K	-- bilateral	\$1,463.80	42	M
	Exposures for Neurosurgery			
210K	Transabdominal exposure of lumbar and lower thoracic spine for neurosurgical procedure	\$920.00	42	M
211K	Transthoracic exposure of lower cervical or thoracic spine for neurosurgical procedure	\$867.00	42	M

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		Fee	Class	Anae
212K	Transphenoidal exposure of pituitary for hypophysectomy	\$1,835.00	42	M
	Note: Standby time is billable as 50J for the period of time between the completion of opening and the start of the closure.			
	Example: if procedure is 3.5 hours in entirety and - opening and closure combined takes 1 hour - standby is then 2.5 hours			
	The total billing would be the appropriate K code (210K, 211K or 214K) and ten 15 minute units of 50J.			
	Codes 210K to 212K are exempt from the multiple surgery rules.			
	Deep Brain Electrode for Movement Disorders			
235K	Installation of deep brain electrode	\$4,000.00	42	H
236K	- add - Micro-electrode recording and stimulation	\$1,020.00	42	H
237K	- add - Internalization of deep brain electrode using single channel IPG	\$510.00	42	H
238K	- add - Internalization of deep brain implant using dual channel IPG or pulse generator	\$816.00	42	H
	Neuromodulation Clinic Services			
	Clinic supervision, patient monitoring and adjustment of stimulation parameters, drug dose and/or drug mix, includes advice to the patient, either directly or indirectly through the neuromodulation nurse.			
278K	Patient -- not seen	\$58.80		
279K	Patient -- seen (Visit fee payable if patient reviewed for a condition unrelated to neuromodulation device function).	\$86.80		0
	SPINE SURGERY			
	Anterior Decompression			
	Cervical			
500K	Odontoidectomy	\$3,364.00	42	H
501K	-- exposure by separate surgeon	\$2,596.00	42	H
502K	-- exposure by primary surgeon -- add	\$785.00	42	
503K	Discectomy -- 1 level	\$2,178.00	42	M
504K	-- each additiona level -- add	\$606.00	42	
505K	Vertebrectomy -- includes adjacent discs	\$3,403.00	42	H
506K	-- each additiona level -- add	\$587.00	42	
	(Maximum of 3 additional levels)			
507K	Artificial discs -- includes discectomy and fusion	\$4,078.00	42	H
508K	-- each additiona level -- add (Maximum of 1 additional level)	\$3,059.00	42	

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Fee codes 507K and 508K are not billable with any other cervical decompression, fusion or instrumentation code.

Thoracic

514K	Discectomy	\$2,039.00	42	M
714K	- each additional level - add	\$577.00	42	M
515K	Vertebrectomy -- includes adjacent discs	\$3,426.00	42	H
516K	-- each additional level -- add (Maximum of 3 additional levels)	\$510.00	42	
517K	Exposure by primary surgeon	\$897.00	42	M

Lumba

523K	Discectomy	\$2,074.00	42	M
723K	- each additional level - add	\$577.00	42	M
524K	Vertebrectomy -- includes adjacent discs	\$3,322.00	42	H
525K	-- each additional level -- add (Maximum of 2 additional levels)	\$510.00	42	
526K	Artificial disc -- includes discectomy and fusion	\$4,078.00	42	H
527K	-- each additional level -- add (Maximum 1 additional level)	\$3,059.00	42	
528K	Exposure by primary surgeon	\$612.00	42	M

Posterior Decompression

Cervical and Thoracic

Laminectomy, Laminotomy, Foraminotomy

534K	-- unilateral	\$1,764.00	42	M
535K	-- bilateral	\$2,076.00	42	M
536K	-- each additional level -- add (Maximum 4 additional levels)	\$459.00	42	
537K	-- Discectomy -- add	\$622.00	42	
538K	-- Foramen magnum -- add	\$1,038.00	42	
539K	Laminoplasty - includes strut and fixation	\$2,698.00	42	M
540K	-- each additional level -- add (Maximum 5 additional levels)	\$622.00	42	M

Lumbar

Laminectomy, Laminotomy, Foraminotomy

546K	-- unilateral	\$1,876.00	42	M
547K	-- bilateral	\$2,345.00	42	M
548K	-- each additional level -- add (Maximum 5 additional levels)	\$528.00	42	
549K	-- descectomy -- add	\$587.00	42	
	Pedicle subtraction osteotomy			
550K	-- above lumbar 2	\$1,631.00	42	M
551K	-- below or at lumbar 2	\$1,223.00	42	M

For the purpose of fusion and instrumentation, a level is defined as two vertebral bodies with an intervening disc space.

Fusion (degenerative, tumour, trauma, or infective conditions)

Anterior

Cervical, Thoracic, Lumbar

557K	-- first level fused	\$1,056.00	42	M
558K	-- each additional level -- add	\$353.00	42	M

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		Fee	Class	Anae
	(Maximum 4 additional levels)			
	Posterior			
	Cervical, Thoracic, Lumbar			
564K	-- first level fused	\$938.00	42	M
565K	-- each additional level -- add	\$208.00	42	M
	(Maximum 5 additional levels)			
566K	Autologous bone graft harvest from distant site	\$714.00	42	M
567K	Preparation of allograft (Not including premade grafts)	\$510.00	42	M
	Instrumentation			
	Anterior			
573K	Cervical	\$938.00	42	M
574K	-- each additional level -- add	\$234.00	42	M
	(Maximum 3 additional levels)			
575K	Odontoid screw May claim fracture decompression in addition, not fusion.	\$3,042.00	42	H
576K	Thoracic & Lumbar	\$1,223.00	42	H
577K	-- each additional level -- add (Maximum 3 additional levels)	\$204.00	42	M
	Posaterior			
583K	Cervical 1-2 screw fixation	\$2,579.00	42	M
584K	-- if occiput included -- add	\$1,172.00	42	
585K	-- each additional level below Cervical 2 -- add (Maximum of 8 additional levels)	\$469.00	42	
586K	Cervical 1-2 wiring	\$1,152.00	42	M
587K	-- if occiput included -- add	\$1,020.00	42	
588K	-- each additional level below C2 -- add -- maximum of 8	\$408.00	42	
589K	-- hook or wire construct added to another procedure	\$510.00	42	
	Below C2			
590K	1st level	\$1,876.00	42	M
591K	-- each additional level -- add -- maximum of 8	\$408.00	42	
592K	-- each additional level beyond 8 (Maximum of 5 additional levels)	\$204.00	42	
593K	Iliac screws -- add	\$510.00	42	
594K	-- crossing cervicothoracic junction -- add	\$408.00	42	
	Removal			
600K	Anterior or posterior -- per 15 minutes of surgical time May be billed with other procedures	\$188.00	42	M
	Fractures			
606K	Decompression and/or reduction of fracture -- cannot be billed with other decompression codes -- instrumentation and fusion may also be billed	\$1,631.00	0	
607K	Hal ring application	\$918.00	0	
608K	Closed reduction and traction	\$703.00	0	
609K	Halo jacket	\$353.00	0	

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		Fee	Class	Anae
610K	Thoracolumbar bracing	\$469.00		0
	Tumour/Infection/Vascular			
616K	Major decompression code -- add			30 percent of Decompression
617K	Excision of mass without decompression	\$520.00	42	M
618K	Excision of mass with nerve root decompression -- see posterior decompression -- add 30%			30 percent of Posterior Decompression
619K	Removal intradural/extramedullary tumour Cannot be claimed with other decompression codes	\$3,519.00	42	H
620K	Removal of intradural/intramedullary tumour Cannot be claimed with other decompression codes	\$4,151.00	42	H
621K	Excision of intradural vascular malformation Cannot be claimed with other decompression codes	\$3,568.00	42	H
622K	Interruption of spinal dural AV fistula Cannot be claimed with other decompression codes	\$2,651.00	42	H
623K	Percutaneous vertebral biopsy	\$353.00	42	M
624K	Open vertebral biopsy	\$510.00	42	M
	Pain			
630K	Implantation of a single quadripolar electrode	\$1,760.00	42	M
631K	-- additional quadripolar electrode (Maximum of 1 additional electrode)	\$703.00	42	
632K	Implantation of a single quadripolar electrode -- if surgery in same area as a previous surgery	\$2,072.00	42	M
633K	-- additional quadripolar electrode -- if surgery in same areas as previous surgery (Maximum of 1 additional electrode)	\$748.00	42	
634K	Implantation of octopolar electrode	\$1,876.00	42	M
635K	-- additional octopolar electrode (Maximum of 1 additional electrode)	\$703.00	42	
636K	If laminectomy required for electrode insertion -- 8 contacts	\$1,764.00	42	M
637K	-- 16 contacts	\$2,512.00	42	M
638K	Internalization of stimulation system -- non-rechargeable	\$587.00	42	M
639K	-- rechargeable	\$822.00	42	M
640K	Removal of stimulating electrode	\$469.00	42	M
641K	Adjustment of stimulating electrodes	\$932.00	42	M
642K	Programming of pump	\$234.00	42	
643K	Programming of pulse generator	\$234.00	42	
644K	Myelotomy for pain -- open or percutaneous Cannot be claimed with other decompression codes	\$2,039.00	42	H
645K	Pain pump implantation	\$1,760.00	42	M
646 K	Dorsal root entry zone lesioning or percutaneous CT guided cordotomy	\$2,243.00	42	H
647K	Repair or replacement of blocked intrathecal catheter	\$1,056.00	42	M
648K	Reanchoring a flipping pump	\$703.00	42	M
649K	Replacement of pain pump	\$938.00	42	M
650K	Removal of pain pump and catheters .	\$703.00	42	M
651K	Replacement of Pulse generator -- rechargeable	\$822.00	42	M
652K	Replacement of Pulse generator -- non-rechargeable	\$587.00	42	M

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		Fee	Class	Anae
	Miscellaneous			
658K	Vertebroplasty	\$1,241.00	42	M
659K	-- each additional level -- add (Maximum of 3 additional levels)	\$418.00	42	
660K	-- in addition to another spinal procedure	\$461.00	42	
661K	Kyphoplasty	\$1,876.00	42	M
662K	-- each additional level -- add (Maximum of 1 additional level)	\$1,172.00	42	
663K	-- in addition to another spinal procedure	\$612.00	42	
664K	Spinal duraplasty	\$577.00	42	M
665K	Syringosubarachnoid shunt	\$1,835.00	42	H
666K	Syringopleural or syringoperitoneal shunt	\$2,243.00	42	H
667K	Management of intradural congenital lesion -- includes diastematomyelia, tethered cord, lipoma	\$2,284.00	42	H
668K	Intradural rhizotomy	\$2,243.00	42	H
669K	Meningocele repair	\$1,493.00	42	M
670K	Myelomeningocele repair	\$1,994.00	42	M
671K	-- if plastic surgeon performs closure	\$1,020.00	42	M
331K	Team Spinal Surgery -- where procedures requires the presence of two spine surgeons working in equal capacity - not for routine assisting. -- Can be billed by all neurosurgeons and and orthopaedic surgeons.	50% of First Surgeon's Claim		
	Premiums			
677K	Acute spinal cord injury (ASIA, A, B or C less than 6 weeks)	15% of Surgery		
678K	Monitoring - Electromyogram (EMG) - Motor Evoked Potentials (MEP) - Somatosensory Evoked Potentials (SSEP)	\$612.00	42	
679K	Spine surgery supplement for patients with a Body Mass Index, (Weight [kg]/Height[m] ²) greater than 40 - Maximum of one 679K supplement per patient per day. - Supplement 679K may be billed by spine surgeons with all K Section spine procedures done in the operating room.	\$343.00		
680K	Spinal stereotaxy for tumor, trauma, revision, pediatric, and greater than 3 levels of deformity	\$1,172.00	42	M
681K	Revision surgery -- add	30 percent of Decompression		
682K	Revision surgery -- add	30 percent of Fusion		