



Issue Number: 201

Date: 10/04/2025

The CCSD Working Group has reviewed requests since the last cut-off date of the 4th of March 2025 and has agreed on the following changes to the CCSD Procedural Schedule with a **recommended adoption date of the 11th of June 2025**. There is nothing to stop these codes being implemented before that date.

### New code(s)

Request	Code	Approved Narrative
<b>7261</b>	Q0810 & Q0820	Vaginal transluminal endoscopic hysterectomy +/- salpingo-oophorectomy +/- ureterolysis. & Vaginal transluminal endoscopic myomectomy +/- ureterolysis
<b>7428</b>	T7916	Arthroscopic rotator cuff repair greater than 2cm with tenodesis of biceps tendon
<b>7436</b>	W3722	Minimally invasive hip replacement +/- cement - bilateral
<b>7427</b>	T7917	Core decompression of shoulder
<b>7386</b>	N3000	Dorsal slit of the prepuce
<b>7470</b>	T2021	Laparoscopic repair of inguinal hernia requiring mesh - unilateral
<b>7471</b>	T2022	Laparoscopic repair of recurrent inguinal hernia requiring mesh - unilateral
<b>7472</b>	T2023	Laparoscopic repair of inguinal hernia requiring mesh - bilateral
<b>7473</b>	T2024	Laparoscopic repair of recurrent inguinal hernia requiring mesh - bilateral

### Narrative change(s)

Request	Code	Previous Narrative	Approved Narrative
<b>7442</b>	M0942	Robotic assisted pyelolithotomy (including cystoscopy and retrograde catheterisation)	Robotic assisted nephrolithotomy (including cystoscopy and retrograde catheterisation)
<b>7437</b>	K5730	Ablation of atrial arrhythmia (including mapping)	Ablation of right atrial arrhythmia (including mapping)
<b>7438</b>	K5760	Ablation of atrial fibrillation by isolation of the pulmonary veins left/right (RFA/CRYO/Laser) (including mapping)	Ablation of left atrial fibrillation by isolation of the pulmonary veins left/right (RFA/CRYO/Laser) (including mapping)

### Inactivation(s)

Request	Code	Existing Narrative
<b>7466</b>	T2002	Laparoscopic repair of inguinal hernia - unilateral
<b>7467</b>	T2102	Laparoscopic repair of recurrent inguinal hernia – unilateral
<b>7468</b>	T2012	Laparoscopic repair of inguinal hernial - bilateral
<b>7469</b>	T2112	Laparoscopic repair of recurrent inguinal hernia – bilateral

Please note that the inclusion of procedural codes within the CCSD Schedule does not indicate the automatic agreement of individual insurers to provide benefit for this procedure. Please contact each insurer directly to ascertain whether benefit is provided.

