CHAPTER 13
SECTION 9.1
ADDENDUM 1, SECTION 4

TRICARE-APPROVED AMBULATORY SURGERY PROCEDURES - RESPIRATORY SYSTEM

The number following the procedure code is the TRICARE payment group.

NOSE

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
EXCISION		
30115	4	Excision, nasal polyp(s), extensive
30117	5	Excision or destruction, any method (including laser) intranasal lesion; internal approach
30118	5	Excision or destruction, intranasal lesion; external approach (lateral rhinotomy)
30120	3	Excision or surgical planing of skin of nose for rhinophyma
30124	2	Excision dermoid cyst, nose; simple, skin, subcutaneous
30125	4	Excision dermoid cyst, nose; complex, under bone or cartilage
30130	5	Excision turbinate, partial or complete
30140	4	Submucous resection turbinate, partial or complete
30150	5	Rhinectomy; partial
30160	6	Rhinectomy; total
REMOVAL FOREIGN BODY		
30310	2	Removal foreign body, intranasal; requiring general anesthesia
30320	4	Removal foreign body; by lateral rhinotomy
REPAIR		
30400	6	Rhinoplasty, primary; lateral and alar cartilages and/or elevation of nasal tip
30410	7	Rhinoplasty, primary; complete, external parts including bony pyramid, lateral and alar cartilages, and/or elevation of nasal tip
30420	9	Rhinoplasty, primary; including major septal repair
30430	5	Rhinoplasty, secondary; minor revision (small amount of nasal tip work)
30435	7	Rhinoplasty, secondary; intermediate revision (bony work with osteotomies)
30450	9	Rhinoplasty, secondary; major revision (nasal tip work and osteotomies)
30520	8	Septoplasty or submucous resection, with or without cartilage scoring, contouring or replacement with graft
30540	7	Repair choanal atresia; intranasal
30560	4	Lysis intranasal synechia
30580	6	Repair fistula; oromaxillary (combine with 31030 if antrotomy is included)
30600	6	Repair fistula; oronasal
30620	9	Septal or other intranasal dermatoplasty (does not include obtaining graft)
30630	9	Repair nasal septal perforations

NOSE (CONTINUED)

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
30801	2	Cauterization and/or ablation, mucosa of turbinates, unilateral or bilateral, any method, (separate procedure); superficial
30802	2	Cauterization and/or ablation, mucosa of turbinates, unilateral or bilateral, any method, (separate procedure); intramural
OTHER PROCEDURES		
30903	1	Control nasal hemorrhage, anterior, complex (extensive cautery and/or packing) any method
30905	1	Control nasal hemorrhage, posterior, with posterior nasal packs and/or cauterization any method; initial
30906	2	Control nasal hemorrhage, posterior, with posterior nasal packs and/or cauterization; subsequent
30915	4	Ligation arteries; ethmoidal
30920	5	Ligation arteries; internal maxillary artery, transantral

ACCESSORY SINUSES

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
INCISION		
31020	4	Sinusotomy, maxillary (antrotomy); intranasal
31030	5	Sinusotomy, maxillary (antrotomy); radical, (Caldwell-Luc) without removal of antrochoanal polyps
31032	6	Sinusotomy, maxillary (antrotomy); radical (Caldwell-Luc) with removal of antrochoanal polyps
31050	4	Sinusotomy, sphenoid, with or without biopsy
31051	6	Sinusotomy, sphenoid, with or without biopsy; with mucosal stripping or removal of polyp(s)
31070	4	Sinusotomy frontal; external, simple (trephine operation)
31075	6	Sinusotomy frontal; transorbital, unilateral (for mucocele or osteoma, Lynch type)
31080	6	Sinusotomy frontal; obliterative without osteoplastic flap, brow incision (includes ablation)
31084[2]	6	Sinusotomy frontal; obliterative with osteoplastic flap, brow incision
31086	6	Sinusotomy frontal; nonobliterative, with osteoplastic flap, brow incision
31090	9	Sinusotomy combined, three or more sinuses
EXCISION		
31200	4	Ethmoidectomy; intranasal, anterior
31201	7	Ethmoidectomy; intranasal, total
31205	5	Ethmoidectomy; extranasal, total
ENDOSCOPY		
31233	4	Nasal/sinus endoscopy, diagnostic with maxillary sinusoscopy (via inferior meatus or canine fossa puncture)
31235	2	Nasal/sinus endoscopy, diagnostic with sphenoid sinusoscopy (via puncture of sphenoidal face or cannulation of osteum)
31237	4	Nasal/sinus endoscopy, surgical; with biopsy, polypectomy or debridement (separate procedure)
31238	2	Nasal/sinus endoscopy, surgical; with control of epistaxis
31239	6	Nasal/sinus endoscopy, surgical; with dacryocystorhinostomy

ACCESSORY SINUSES (CONTINUED)

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
31240	4	Nasal/sinus endoscopy, surgical; with concha bullosa resection
31245[3]	5	Nasal/sinus endoscopy, surgical, with osteomeatal complex (OMC) resection and/or anterior ethmoidectomy, with or without removal of polyp(s);
31246[3]	5	Nasal/sinus endoscopy, surgical, with osteomeatal complex (OMC) resection and/or anterior ethmoidectomy, with or without removal of polyp(s); with antrostomy
31247[3]	5	Nasal/sinus endoscopy, surgical, with osteomeatal complex (OMC) resection and/or anterior ethmoidectomy, with or without removal of polyp(s); with antrostomy and removal of antral mucosal disease
31248[3]	5	Nasal/sinus endoscopy, surgical, with osteomeatal complex (OMC) resection and/or anterior ethmoidectomy, with or without removal of polyp(s); with frontal sinus exploration
31249[3]	5	Nasal/sinus endoscopy, surgical, with osteomeatal complex (OMC) resection and/or anterior ethmoidectomy, with or without removal of polyp(s); with frontal sinus exploration and antrostomy
31251[3]	5	Nasal/sinus endoscopy, surgical, with osteomeatal complex (OMC) resection and/or anterior ethmoidectomy, with or without removal of polyp(s); with frontal sinus exploration, antrostomy, and removal of antral mucosal disease
31254[1]	5	Nasal/sinus endoscopy, surgical; with ethmoidectomy, partial (anterior)
31255[1]	7	Nasal/sinus endoscopy, surgical; with ethmoidectomy, total (anterior and posterior)
31256[1]	5	Nasal/sinus endoscopy, surgical, with maxillary antrostomy;
31261[3]	7	Nasal/sinus endoscopy, surgical, with anterior and posterior ethmoidectomy (APE), with or without removal of polyp(s);
31262[3]	7	Nasal/sinus endoscopy, surgical, with anterior and posterior ethmoidectomy (APE), with or without removal of polyp(s); with antrostomy
31264[3]	7	Nasal/sinus endoscopy, surgical, with anterior and posterior ethmoidectomy (APE), with or without removal of polyp(s); with antrostomy and removal of antral mucosal disease
31266[3]	7	Nasal/sinus endoscopy, surgical, with anterior and posterior ethmoidectomy (APE), with or without removal of polyp(s); with frontal sinus exploration
31267[1]	5	Nasal/sinus endoscopy, surgical, with maxillary antrostomy; with removal of tissue from maxillary sinus
31269[3]	7	Nasal/sinus endoscopy, surgical, with anterior and posterior ethmoidectomy (APE), with or without removal of polyp(s); with frontal sinus exploration and antrostomy
31271[3]	7	Nasal/sinus endoscopy, surgical, with anterior and posterior ethmoidectomy (APE), with or without removal of polyp(s); with frontal sinus exploration, antrostomy, and removal of antral mucosal disease
31276[1]	5	Nasal/sinus endoscopy, surgical with frontal sinus exploration, with or without removal of tissue from frontal sinus

ACCESSORY SINUSES (CONTINUED)

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
31280[3]	7	Nasal/sinus endoscopy, surgical, with anterior and posterior ethmoidectomy and sphenoidotomy (APS), with or without removal of polyp(s);
31281[3]	7	Nasal/sinus endoscopy, surgical, with anterior and posterior ethmoidectomy and sphenoidotomy (APS), with or without removal of polyp(s); with antrostomy
31282[3]	7	Nasal/sinus endoscopy, surgical, with anterior and posterior ethmoidectomy and sphenoidotomy (APS), with or without removal of polyp(s); with antrostomy and removal of antral mucosal disease
31283[3]	7	Nasal/sinus endoscopy, surgical, with anterior and posterior ethmoidectomy and sphenoidotomy (APS), with or without removal of polyp(s); with frontal sinus exploration
31284[3]	7	Nasal/sinus endoscopy, surgical, with anterior and posterior ethmoidectomy and sphenoidotomy (APS), with or without removal of polyp(s); with frontal sinus exploration and antrostomy
31286[3]	7	Nasal/sinus endoscopy, surgical, with anterior and posterior ethmoidectomy and sphenoidotomy (APS), with or without removal of polyp(s); with frontal sinus exploration, antrostomy and removal of antral mucosal disease
31287	5	Nasal/sinus endoscopy, surgical, with sphenoidotomy;
31288	5	Nasal/sinus endoscopy, surgical, with sphenoidotomy; with removal of tissue from the sphenoid sinus

LARYNX

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
EXCISION		
31300	7	Laryngotomy (thyrotomy, laryngofissure); with removal of tumor or laryngocele, cordectomy
31320	4	Laryngotomy (thyrotomy, laryngofissure); diagnostic
ENDOSCOPY		
31510	4	Laryngoscopy, indirect (separate procedure); with biopsy
31511	4	Laryngoscopy, indirect (separate procedure); with removal of foreign body
31512	4	Laryngoscopy, indirect (separate procedure); with removal of lesion
31513	4	Laryngoscopy, indirect (separate procedure); with vocal cord injection
31515	2	Laryngoscopy direct, with or without tracheoscopy; for aspiration
31525	2	Laryngoscopy, direct, with or without tracheoscopy; diagnostic, except newborn
31526	4	Laryngoscopy, direct, with or without tracheoscopy; diagnostic, with operating microscope
31527	2	Laryngoscopy, direct, with or without tracheoscopy; with insertion of obturator
31528	4	Laryngoscopy direct, with or without tracheoscopy; with dilation, initial
31529	4	Laryngoscopy direct, with or without tracheoscopy; with dilation, subsequent
31530	4	Laryngoscopy, direct, operative, with foreign body removal

LARYNX (CONTINUED)

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
31531	5	Laryngoscopy, direct, operative, with foreign body removal; with operating microscope
31535	6	Laryngoscopy, direct, operative, with biopsy
31536	6	Laryngoscopy, direct, operative, with biopsy; with operating microscope
31540	6	Laryngoscopy, direct, operative, with excision of tumor and/or stripping of vocal cords or epiglottis
31541	7	Laryngoscopy, direct, operative, with excision of tumor and/or stripping of vocal cords or epiglottis; with operating microscope
31560	7	Laryngoscopy, direct, operative, with arytenoidectomy
31561	7	Laryngoscopy, direct, operative, with arytenoidectomy; with operating microscope
31570	4	Laryngoscopy, direct, with injection into vocal cord(s), therapeutic
31571	4	Laryngoscopy, direct, with injection into vocal cord(s), therapeutic; with operating microscope
31576	4	Laryngoscopy, flexible fiberoptic; with biopsy
31577	4	Laryngoscopy, flexible fiberoptic; with removal of foreign body
31578	4	Laryngoscopy, flexible fiberoptic; with removal of lesion
31580	7	Laryngoplasty; for laryngeal web, two stage, with keel insertion and removal
31582	7	Laryngoplasty; for laryngeal stenosis, with graft or core mold, including tracheotomy
31584	6	Laryngoplasty; with open reduction of fracture
31585	2	Treatment of closed laryngeal fracture; without manipulation
31586	4	Treatment of closed laryngeal fracture; with closed manipulative reduction
31588	7	Laryngoplasty, not otherwise specified (e.g., for burns, reconstruction after partial laryngectomy)
31590	7	Laryngeal reinnervation by neuromuscluar pedicle
DESTRUCTION		
31595	4	Section recurrent laryngeal nerve, therapeutic (separate procedure), unilateral

TRACHEA AND BRONCHI

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
INCISION		
31600	4	Tracheostomy, planned (separate procedure)
31611	5	Construction of trachesophageal fistula and subsequent insertion of an alaryngeal speech prosthesis (e.g., voice button, Blom-Singer prosthesis)
31612	2	Tracheal puncture, percutaneous for aspiration of mucus (transtracheal aspiration)
31613	4	Tracheostoma revision; simple, without flap rotation
31614	4	Tracheostoma revision; complex, with flap rotation
ENDOSCOPY		
31615	2	Tracheobronchoscopy through established tracheostomy incision
31622	4	Bronchoscopy (flexible or rigid); diagnostic, with or without cell washing (separate procedure)
31625	5	Bronchoscopy; with biopsy

TRACHEA AND BRONCHI (CONTINUED)

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
31628	6	Bronchoscopy; with transbronchial lung biopsy, with or without fluoroscopic guidance
31629	4	Bronchoscopy; with transbronchial needle aspiration biopsy
31630	4	Bronchoscopy; with tracheal or bronchial dilation or closed reduction of fracture
31631	4	Bronchoscopy; with tracheal dilation and placement of tracheal stent
31635	4	Bronchoscopy; with removal of foreign body
31640	4	Bronchoscopy; with excision of tumor
31641	4	Bronchoscopy; with destruction of tumor or relief of stenosis by any method other than excision (e.g., laser)
31645	5	Bronchoscopy; with therapeutic aspiration of tracheobronchial tree, initial (e.g., drainage of lung abscess)
31646	2	Bronchoscopy; with therapeutic aspiration of tracheobronchial tree, subsequent
31656	2	Bronchoscopy; with injection of contrast material for segmental bronchography (fiberscope only)
31659[3]	2	Bronchoscopy; with other bronchoscopic procedures
INTRODUCTION		
31700	2	Catheterization, transglottic (separate procedure)
31710	2	Catheterization for bronchography, with or without instillation of contrast material
31715	2	Transtracheal injection for bronchography
31717	2	Catheterization with bronchial brush biopsy
31720	2	Catheter aspiration (separate procedure); nasotracheobronchial
31730	2	Transtracheal (percutaneous) introduction of needle wire dilator/stent or indwelling tube for oxygen therapy
REPAIR		
31750	7	Tracheoplasty; cervical
31755	4	Tracheoplasty; tracheopharyngeal fistulization, each stage
31785	6	Excision of tracheal tumor or carcinoma; cervical
SUTURE		
31800	4	Suture of external tracheal wound or injury; cervical
31820	2	Surgical closure tracheostomy or fistula; without plastic repair
31825	4	Surgical closure tracheostomy or fistula; with plastic repair
31830	4	Revision of tracheostomy scar

LUNGS AND PLEURA

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
INCISION		
32000	2	Thoracentesis, puncture of pleural cavity for aspiration, initial or subsequent
32002	4	Thoracentesis with insertion of tube with or without water seal (e.g., for pneumothorax) (separate procedure)
32005	4	Chemical pleurodesis (e.g., for recurrent or persistent pneumothorax)
32020	4	Tube thoracostomy with or without water seal (e.g., for abscess, hemothorax, empyema)(separate procedure)

LUNGS AND PLEURA (CONTINUED)

PROCEDURE CODE	PAYMENT GROUP	DESCRIPTION
EXCISION		
32400	2	Biopsy, pleura; percutaneous needle
32405	5	Biopsy, lung or mediastinum, percutaneous needle
32420	2	Pneumonocentesis, puncture of lung for aspiration

Except as provided below, all procedures are effective as of November 1, 1994

[1] Code added for services performed on or after January 1, 1995
[2] Code added for services performed on or after February 27, 1995
[3] Code deleted for services performed on or after April 1, 1995
[4] Code deleted for services performed on or after April 26, 1995
[5] Payment group changed for services performed on or after February 27, 1995
[6] Code added October 1995 effective for services performed on or after November 1, 1994
[7] Code deleted for services performed on or after March 31, 1996
[8] Code added for services performed on or after January 1, 1996
[9] Code added for services performed on or after January 1, 1997
[10] Code deleted for services performed on or after January 1, 1997
[11] Code added for services performed on or after November 1, 1998
[12] Code deleted for services performed on or after January 1, 2000
[13] Code added for services performed on or after January 1, 2000
[14] Code deleted for services performed on or after January 1, 2001
[15] Code added for services performed on or after January 1, 2001