

Payment Policy | Oral Surgeons Filing for Anesthesia Services in the Office Setting



EFFECTIVE DATE: 05|23|2011
POLICY LAST UPDATED: 11|02|2022

OVERVIEW

General anesthesia and intravenous sedation provided by an oral surgeon in the office setting is considered a separate covered service under the BCBSRI member's medical benefit when performed in conjunction with a covered surgical procedure.

MEDICAL CRITERIA

Not applicable.

PRIOR AUTHORIZATION

Not applicable.

POLICY STATEMENT

Commercial Products and Medicare Advantage Plans

General anesthesia and intravenous sedation provided by an oral surgeon in the office setting is considered a separate covered service under the BCBSRI member's medical benefit when performed in conjunction with a covered CPT surgical procedure code. A separate payment is made for anesthesia services in the office setting.

Anesthesia services will be denied when the procedure code submitted is not a covered medical procedure. To ensure correct claims processing, the oral surgeon will submit the oral surgical CPT procedure code and the anesthesia/sedation CDT code (see below) on a CMS1500 form typically filed for BCBSRI medical coverage.

General anesthesia and intravenous sedation provided in conjunction with a non-covered surgical procedure performed by an oral surgeon in the office setting will be not covered and a member liability.

COVERAGE

Benefits may vary by group/contract. Please refer to the appropriate Evidence of Coverage or Subscriber Agreement for the applicable "Surgery Services" benefit.

LIMITATIONS:

Payment under the BCBSRI member's medical benefit for general anesthesia and IV sedation codes are covered under the medical benefit only when performed in conjunction with oral surgical CPT codes that are considered covered.

BACKGROUND

Not applicable.

CODING

The following CDT anesthesia codes are covered when filed with a covered medical CPT code.

D9222 deep sedation/general anesthesia, first 15 minutes

D9223 deep sedation/general anesthesia, each 15 minute increment

D9243 intravenous moderate (conscious) sedation/analgesia, each 15 minute increment

The following CDT codes are not covered and are considered a member liability:

D9230 Inhalation of nitrous oxide/analgesia, anxiolysis
D9248 Non-intravenous conscious sedation

RELATED POLICIES

Dental Service Performed in Outpatient Hospital/Ambulatory Surgical Facility
Dental Services for Accidental Injury

PUBLISHED

Provider Update, January 2023
Provider Update, April 2019
Provider Update, January 2018
Provider Update, February 2017
Provider Update, August 2011

REFERENCES

Not applicable.

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