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DMAP Policy and Planning Section

Authorized Signature

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Issue Date: 11/08/2007

Topic: Medical Benefits

Subject: Provider announcement: Anesthesia billing update

Applies to (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input type="checkbox"/> Area Agencies on Aging | <input type="checkbox"/> Health Services |
| <input type="checkbox"/> Children, Adults and Families | <input type="checkbox"/> Seniors and People with Disabilities |
| <input type="checkbox"/> County DD Program Managers | <input checked="" type="checkbox"/> Other (please specify): DHS staff and others identified on the SPD, CAF, AMH and DMAP transmittal lists |

Message:

DMAP will mail the following announcement to anesthesiologists and nurse anesthetists. It reminds them of a change to billing practices for anesthesia services effective July 1, 2007, and outlined in Oregon Administrative Rule 410-130-0368 in the [OHP Medical-Surgical Services rulebook](#).

If you have any questions about this information, contact:

| | | | |
|--------------------|--|-------------|--------------|
| Contact(s): | Celeste Symonette, DMAP Medical Policy Analyst | | |
| Phone: | 503-945-6490 | Fax: | 503-947-1119 |
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Oregon

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November 8, 2007

To: Anesthesiologists and Nurse
Anesthetists

From: Jean S. Phillips, Interim Deputy Administrator
DMAP Program and Policy Section

Subject: Anesthesia Billing Update



Effective July 1, 2007, DMAP now automatically adds, per billed anesthesia code, the current year's American Society of Anesthesiologists (ASA) base unit values to the provider's billed time units, to establish full payment. When completing a claim, providers no longer need to calculate the sum of per-code ASA base units and time units used.

This means that for most anesthesia services rendered on or after July 1, 2007, you only need to bill for time units. There are two exceptions:

- **Neuraxial labor analgesia/anesthesia** (code 01967): DMAP pays a flat rate for this service. Do not bill for this service in time units.
- **Codes that have no time unit allowance** (e.g., 01953 or 01996): DMAP pays for such codes based on ASA base units alone. When billing with such codes, enter zero units.

DMAP made these billing changes in response to multiple requests from anesthesia service providers. The Oregon Society of Anesthesiology played a key role, not only in initiating this change, but helping to clarify the final rule language.

A complete copy of the July 1, 2007, Anesthesia Services Rule (410-130-0368) is enclosed for your review. You can also find this rule in the Medical-Surgical Services rulebook on the OHP Web site at www.dhs.state.or.us/policy/healthplan/guides/medsurg/main.html. Make sure to eSubscribe to this page so that you can receive e-mail notification whenever we add new information.

Thank you for your support of the Oregon Health Plan.

Questions?

If you have billing questions, call DMAP Provider Services at 800-336-6016 or e-mail dmap.providerservices@state.or.us.

DMAP PA 07-226

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HSB 1014 (4/00)

410-130-0368 Anesthesia Services

1. Anesthesia is not covered for procedures that are below the funding line on the Health Services Commission's Prioritized List of Health Services (see OAR 410-141-0520).
2. Reimbursement is based on the base units listed in the current American Society of Anesthesiology (ASA) Relative Value Guide plus one unit per each 15 minutes of anesthesia time, except for anesthesia for neuraxial labor analgesia/anesthesia (code 01967). See item 3 below for reporting neuraxial labor analgesia/anesthesia.
 - a) For anesthesia services billed (excluding OB code 01967), do not bill the "base units" plus "time units" as the total quantity of service units. (DMAP will automatically calculate the base units for the billed anesthesia code using current year ASA listing of base units.)
 - b) Bill only, the total quantity of time units on one line. 1 unit of time equals one 15 minute increment of anesthesia time: (For example, 1 hour (60 minutes) equals 4 units of anesthesia time.) DMAP will then add the billed time units to the anesthesia code base units to determine total units for payment.
 - c) For the last fraction of time less than 15 minutes, bill one unit for 8-14 minutes. Do not bill a unit for 1-7 minutes of time.
- (3) Anesthesia for neuraxial labor analgesia/anesthesia (01967) will be paid at a flat rate. DMAP will disregard the number of units in the unit field and pay a flat rate/unit of one. OB Services that do not include labor (i.e. 01958-10966) and code billed in conjunction with 01967 (i.e. 01968 and 01969) should be reported with the appropriate time units only (see item 2b above).
- (4) Reimbursement for qualifying circumstances codes 99100-99140 and modifiers P1-P6 is bundled in the payment for codes 00100-01999. Do not add charges for 99100-99140 and modifiers P1-P6 in charges for 00100-01999.
- (5) A valid consent form is required for all hysterectomies and sterilizations.
- (6) If prior authorization (PA) was not obtained on a procedure that requires PA, then the anesthesia services may not be paid. Refer to OAR 410-130-0200 PA Table 130-0200-1.
- (7) Anesthesia services are not payable to the provider performing the surgical procedure except for conscious sedation.

Statutory Authority: ORS Chapter 409

Statutes Implemented: 414.065

7-1-07