

# Anesthesia

Reimbursement Policy ID: RPC.0028.6400

Recent review date: 03/2024

Next review date: 12/2024

AmeriHealth Caritas Florida reimbursement policies and their resulting edits are based on guidelines from established industry sources, such as the Centers for Medicare and Medicaid Services (CMS), the American Medical Association (AMA), state and federal regulatory agencies, and medical specialty professional societies. Reimbursement policies are intended as a general reference and do not constitute a contract or other guarantee of payment. AmeriHealth Caritas Florida may use reasonable discretion in interpreting and applying its policies to services provided in a particular case and may modify its policies at any time.

In making claim payment determinations, the health plan also uses coding terminology and methodologies based on accepted industry standards, including Current Procedural Terminology (CPT); the Healthcare Common Procedure Coding System (HCPCS); and the International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM), and other relevant sources. Other factors that may affect payment include medical record documentation, legislative or regulatory mandates, a provider's contract, a member's eligibility in receiving covered services, submission of clean claims, and other health plan policies, and other relevant factors. These factors may supplement, modify, or in some cases supersede reimbursement policies.

This reimbursement policy applies to all health care services billed on a CMS-1500 form or its electronic equivalent, or when billed on a UB-04 form or its electronic equivalent.

## **Policy Overview**

This policy addresses reimbursement of anesthesia services that are an integral part of procedural services.

#### **Exceptions**

N/A

## **Reimbursement Guidelines**

Anesthesia services must be submitted with at least one CPT anesthesia codes in the range 00100-01999. These codes are reimbursed based on time units using the anesthesia formula that is published in the Florida Medicaid Practitioner Fee Schedule.

Providers must include the following modifiers, as appropriate, on the claim form:

• 78 - Unplanned return to the operating room, related procedure

- QK Physician supervision of anesthesia
- QS MAC

#### **Base values**

Each CPT anesthesia code (00100-01999) is assigned a base value by the American Society of Anesthesiologists, and AmeriHealth Caritas Florida uses these values for determining reimbursement. The base value for each code is comprised of units referred to as the base unit value.

#### **Time reporting**

Consistent with CMS guidelines, AmeriHealth Caritas Florida requires time-based anesthesia services be reported with actual anesthesia time in one-minute increments. For example, if the anesthesia time is one hour, then 60 minutes should be submitted. Post-surgical pain blocks are frequently placed before anesthesia induction or after anesthesia emergence. When the pain block is placed before induction or after emergence, the time spent placing the pain block may not be added to the reported anesthesia time; this is true even if sedation and monitoring is provided to the member during pain block placement.

During claim processing, the total time is divided by 15-minute increments and rounded down to the nearest whole unit. Total time that is less than 15 minutes is rounded up to one 15-minute increment (unit) and will also pay base rate.

AmeriHealth Caritas Florida reimburses covered services based on the provider's contractual rates with the plan and the terms of reimbursement identified within this policy.

## Definitions

N/A

# **Edit Sources**

- I. Current Procedural Terminology (CPT) and associated publications and services.
- II. Healthcare Common Procedure Coding System (HCPCS).
- III. https://ahca.myflorida.com/medicaid/rules/rule-59g-4.002-provider-reimbursement-schedules-and-billing-codes
- IV. https://ahca.myflorida.com/medicaid/rules/adopted-rules-service-specific-policies

## Attachments

N/A

## **Associated Policies**

N/A

# **Policy History**

04/2024	Revised preamble
03/2024	Reimbursement Policy Committee Approval
08/2023	Removal of policy implemented by AmeriHealth Caritas Florida from Policy
	History section

01/2023	Template revised
	Revised preamble
	Removal of Applicable Claim Types table
	<ul> <li>Coding section renamed to Reimbursement Guidelines</li> </ul>
	Added Associated Policies section