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To: All Providers of Dental Anesthesia

From: Matt Wimmer, Administrator 

Subject: Office-Based Pediatric Dental Anesthesia Policy

The attached document replaces any previously issued policy or guidance around dental anesthesia for pediatric participants receiving services in the office.

If you have questions, please contact the Medical Care Policy Team at MCPT@dhw.idaho.gov. Thank you for participating in Idaho Medicaid.

MW/wd

Attachments:

* Idaho Medicaid Policy: *Office-Based Pediatric Dental Anesthesia*

IDAHO MEDICAID POLICY:

OFFICE-BASED PEDIATRIC DENTAL ANESTHESIA

SECTION I. POLICY METADATA

1. Policy Type – Medical
2. Policy Status – Final
3. Policy Author – Medical Director, Medical Care Policy Team
4. Initial Effective Date – Dates of service on or after 1/1/2020
5. Last Revision Date – 01/28/2020
6. Revision Approval Date – 02/10/2020
7. Next Review Date – TBD

SECTION II. BACKGROUND

Pediatric patients with serious dental problems often require procedures provided under moderate to deep sedation or general anesthesia, due to the child's age or emotional/cognitive development that prevents them from cooperating with a procedure under local anesthesia. Sedation and general anesthesia in children has significant risks including respiratory depression and death. Traditionally, these risks have required even simple procedures (i.e., extractions) to be provided in a monitored setting such as same-day surgery centers or hospital operating rooms, which leads to high costs, unnecessary delays, and significant stress for the family.

This policy replaces the prior policy titled “Dental Anesthesia and Deep Sedation Provided by a Dentist,” dated 1/15/16.

SECTION III. POLICY

Idaho Medicaid reimburses dental anesthesiologists for providing dental anesthesia services in the office to Idaho Medicaid members, under the age of 21, when provided in accordance with this policy.

Provider Qualifications

Providers must meet the following qualifications to be reimbursed for these services:

- Idaho Licensure as a doctor of dentistry in accordance with [IDAPA 19.01.01, “Rules of the Idaho State Board of Dentistry”](#) and two-year post-graduate residency in dental anesthesia with significant training in the management of pediatric patients; or Idaho Licensure as a doctor of medicine in accordance with [IDAPA 22.01.01, “Rules of the Board of Medicine for the Licensure to Practice Medicine and Osteopathic Medicine in Idaho,”](#) a three-year residency in anesthesiology, and a one-year post-graduate fellowship in pediatric anesthesiology;
- Certification in Advanced Cardiac Life Support (ACLS) and Pediatric Advanced Life Support (PALS), as well as advanced airway management;

- Must follow the guidelines referenced in this policy for clinical protocol (or their future iterations) and follow best practices for office-based dental anesthesia; and
- Must meet all requirements as specified by [IDAPA 19.01.01, “Rules of the Idaho State Board of Dentistry”](#) for the delivery of dental anesthesia services.

Documentation Requirements

Providers are required to maintain written documentation of the services provided and parent or guardian consent that meets the requirements of:

- [IDAPA 16.03.09, “Medicaid Basic Plan Benefits;”](#)
- [IDAPA 16.05.07, “The Investigation and Enforcement of Fraud, Abuse and Misconduct;”](#)
- [IDAPA 19.01.01, “Rules of the Idaho State Board of Dentistry;”](#)
- The [General Provider and Participant Information](#), Idaho Medicaid Provider Handbook; and
- All applicable state and federal laws.

General Clinical Protocol

Dental anesthesiologists must perform the following activities based on best practices.

Prior to the procedure:

- Review the patient’s case with the dentist performing the procedure and the child’s parent or guardian;
- Determine anesthesia is medically necessary and discuss the risks and benefits with the child’s parent or guardian;
- Redirect the dentist to more conservative treatments where possible;
- Conduct the pre-operative evaluation/assessment prior to the dental procedure to determine if the child meets criteria for ASA Class I or II and is therefore appropriate for office-based dental anesthesia;
- Develop and implement an emergency safety plan including:
 - Preparation to halt the procedure in case of any complications;
 - Details for efficient arrival of emergency personnel and transport to the hospital in case of emergency;
 - An emergency cart in the room stocked with reversal agents (such as flumazenil and naloxone) and the necessary age and size-appropriate equipment to resuscitate a child and safely maintain their airway until arrival at a hospital; and
 - Available support from at least two other persons in the room, at least one of whom is PALS-certified and skilled at obtaining intravenous access.

During the procedure:

- Induce anesthesia and monitor the patient throughout the procedure, including, but not limited to, continuous oximetry, heart rate, and ventilation (ideally by capnography, especially when using deep sedation or general anesthesia);
- Place vascular access immediately after inducing anesthesia, if unable to place prior to induction;
- Utilize the lowest dose drug with the highest therapeutic index for the induction and maintenance of anesthesia; and

- Record full vital signs at a minimum of every ten minutes and more often during deep sedation or general anesthesia.

After the procedure:

- Monitor the child until he or she has been awake for a minimum of 20 minutes, prior to transitioning the care of the child to the parent or guardian.

Excluded from Reimbursement

Anesthesia services for children with severe chronic medical problems (ASA Class III or IV) or airway abnormalities is not reimbursable under this policy and must be referred for appropriate treatment and monitoring in a hospital with a full anesthesia team. Idaho Medicaid does not pay for supervision of anesthesia services.

Note: For additional information regarding basic expectations, please see [“Guidelines for Monitoring and Management of Pediatric Patients Before, During, and After Sedation for Diagnostic and Therapeutic Procedures,”](#) [“American Society of Dentist Anesthesiologists: Parameters of Care,”](#) and [“Practice Guidelines for Moderate Procedural Sedation and Analgesia 2018.”](#)

SECTION IV. POLICY INTENT / RATIONALE

Dental anesthesia is currently not covered within the provisions of Medicaid benefits listed within [IDAPA 16.03.09, “Medicaid Basic Plan Benefits”](#) nor is it described in the [Idaho Medicaid Provider Handbook](#). Dental anesthesia is currently identified as a covered service on the [Idaho Medicaid fee schedule](#), but reimbursement at the listed rate does not afford appropriate access to dental services for our pediatric members.

This policy facilitates access to care for pediatric members of Idaho Medicaid, who require moderate to deep sedation or general anesthesia for an invasive dental procedure within an office-based setting. This policy outlines the basic requirements for the performance of dental anesthesia and the reimbursement methodology that is in alignment with Idaho Medicaid’s requirement under federal law to provide access to dental treatment for children in accordance with Early, Periodic, Screening, Diagnostic and Treatment services. The policy is based on best practice guidelines for dental anesthesia published by professional organizations, including [“Guidelines for Monitoring and Management of Pediatric Patients Before, During, and After Sedation for Diagnostic and Therapeutic Procedures,”](#) [“American Society of Dentist Anesthesiologists: Parameters of Care,”](#) and [“Practice Guidelines for Moderate Procedural Sedation and Analgesia 2018.”](#)

SECTION V. PRIOR AUTHORIZATION

Prior authorization is required for pediatric dental anesthesia performed in the office, in accordance with IDAPA 16.03.09.883 and must be billed with CPT[®] 00170 and an EP modifier. Requests must include the CDT[®] for the dental surgical procedure that will be performed for the participant.

SECTION VI. REIMBURSEMENT FOR COVERED SERVICES

Dental and pediatric anesthesiologists with an approved prior authorization will be able to bill CPT[®] 00170, Anesthesia for intraoral procedures, with an EP modifier for services provided in the

office. Reimbursement is bundled into one unit of CPT® 00170, which includes payment for preoperative assessment, induction of anesthesia, maintenance of anesthesia, and post-anesthesia care, as well as any medications administered, or resuscitation provided. This code will also include any equipment costs, travel costs, or administrative costs the dental or pediatric anesthesiologist may accrue. Idaho Medicaid will reimburse at a rate of \$850 per case.

SECTION VII. CONDITIONS – ALLOW, PEND, OR DENY CLAIMS

1. <Conditions that would be allowed or automatically pay>

Dental anesthesia services provided for the following conditions will be approved for a prior authorization:

Severe Caries, Infection

ICD-10-CMS: E08.630-E08.638, E09.630-E09.638, E10.630-E10.638, E11.630-E11.638, E13.630-E13.638, K02.3, K02.51-K02.9.

CPT®: 41870, 41872.

CDT®: D6096, D6100, D7210-D7251, D7310-D7321, D7450, D7451, D7465, D7471, D7540, D7550, D7963, D7971, D9930.

Periodontal Disease

CDT®: D4240-D4245, D4260, D4261, D4268-D4321, D4381, D5982.

2. <Conditions that would be pended for manual review by a Department RN>

Any conditions not specifically identified in VII.1 above are subject to review.

3. <Conditions that would be automatically denied or denied after review by a Department RN>

Dental anesthesia services provided for the following conditions:

Impacted Wisdom Teeth

CDT® codes **D7220, D7230, D7240, D7241** and **D7250** without evidence of pathology, two or more episodes of pericoronitis, or severe pain directly related to the impacted tooth that does not respond to more conservative treatment.

Cosmetic dental services

ICD-10-CMS: K00.1-K00.3, K00.5, K00.8-K00.9, K03.0-K03.1, K03.3-K03.4, K03.6-K03.7, K03.9, M26.30, M26.39.

Elective dental services:

ICD-10-CMS: K00.7, K08.0, K08.51-K08.52, K08.54, K08.81-K08.89, M26.32, M85.2.

General Claims Payment Requirements: To be considered for reimbursement by Idaho Medicaid, all services provided, and claims submitted to the Department must be in adherence with:

- Nationally recognized standards for billing;

- Medicaid Provider Agreement;
- All Department policies, procedures and rules, including but not limited to, the [General Billing Instructions](#) and [General Provider and Participant Information](#) sections of the Idaho Medicaid Provider Handbook, and any additional sections specific to dental anesthesia and the provider's type and specialty.

SECTION VIII. GLOSSARY

Dental anesthesia: Moderate or deep sedation or general anesthesia provided by a dental anesthesiologist during an invasive dental procedure.

Dental anesthesiologist: Doctors of dentistry who have obtained additional post-graduate residency training in anesthesia and can provide all levels of anesthesia in an office-based setting.

Pediatric anesthesiologist: Doctor of medicine who has obtained residency training in anesthesia and additional fellowship training in pediatric anesthesia.

Moderate sedation: Drug-induced depression of consciousness when patients can still respond to verbal commands or light tactile stimulation and fully maintain their airway (including adequate spontaneous ventilation).

Deep sedation: Drug-induced depression of consciousness when patients only respond after repeated verbal or painful stimuli and may require assistance in maintaining their airway and adequate ventilation.

General anesthesia: Drug-induced loss of consciousness when patients are not arousable, even by painful stimulation and typically require assistance in maintaining their airway and adequate ventilation.

ASA Classification: The American Society of Anesthesiologist's physical status classification that may help predict perioperative risk. ASA Class I patients are completely healthy. ASA Class II patients have mild systemic disease, such as mild lung disease. ASA Class III patients have severe systemic disease and may have significant functional limitations. These patients may have severe asthma or diabetes. ASA Class IV patients have severe systemic disease that is a constant threat to life, such as complicated and symptomatic congenital heart disease. ASA Class V patients are severely ill and unlikely to survive without the operation. ASA Class VI patients have been declared brain dead.

SECTION IX. REFERENCES

"Access to Services." *EPSDT – A Guide for States: Coverage in the Medicaid Benefit for Children and Adolescents, June 2014, pages 28-29*, Centers for Medicare and Medicaid Services, Department of Health and Human Services, https://www.medicaid.gov/medicaid/benefits/downloads/epsdt_coverage_guide.pdf.

"American Society of Dentist Anesthesiologists: Parameters of Care." *Anesth Prog 2018; Vol. 65, pages 197-203*. https://www.asdahq.org/sites/default/files/ASDA.POC_.pdf

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"Early Periodic Screening, Diagnosis and Treatment (EPSDT) Services." *IDAPA 16.03.09, "Medicaid Basic Plan Benefits,"* Sec. 880—883. Department of Administration, State of Idaho, <https://adminrules.idaho.gov/rules/current/16/160309.pdf>.

General Billing Instructions, Idaho Medicaid Provider Handbook. Division of Medicaid, Department of Health and Welfare, State of Idaho, <https://www.idmedicaid.com/General%20Information/General%20Billing%20Instructions.pdf>.

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"Guidelines for Monitoring and Management of Pediatric Patients Before, During, and After Sedation for Diagnostic and Therapeutic Procedures." *Pediatrics, June 2019; Vol. 143, No. 6,* Charles J. Coté, Stephen Wilson, American Academy of Pediatrics and American Academy of Pediatric Dentistry, <https://pediatrics.aappublications.org/content/143/6/e20191000>.

Idaho Medicaid Provider Handbook. Division of Medicaid, Department of Health and Welfare, State of Idaho, <https://www.idmedicaid.com/Provider%20Guide/Provider%20Handbook.aspx>.

IDAPA 16.05.07, "The Investigation and Enforcement of Fraud, Abuse, and Misconduct." Department of Administration, State of Idaho, <https://adminrules.idaho.gov/rules/current/16/160507.pdf>.

IDAPA 19.01.01, "Rules of the Idaho State Board of Dentistry." Department of Administration, State of Idaho, <https://adminrules.idaho.gov/rules/current/19/190101.pdf>.

IDAPA 22.01.01, "Rules of the Board of Medicine for the Licensure to Practice Medicine and Osteopathic Medicine in Idaho." Department of Administration, State of Idaho, <https://adminrules.idaho.gov/rules/current/22/220101.pdf>.

"Practice Guidelines for Moderate Procedural Sedation and Analgesia 2018." *Anesthesiology, March 2018; Vol. 128, No. 3, pages 437-479,* <https://anesthesiology.pubs.asahq.org/article.aspx?articleid=2670190>.