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Pediatric Anesthesia

Department of Health Care Financing and Policy

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Agenda

1. Methodology of Anesthesia Reimbursement
2. Open Discussion on Pediatric Anesthesia and Attributed Costs

State Plan

Attachment 4.19-B, Page 1

- viii. Anesthesia Codes 00100 – 01999 will be reimbursed based on the Centers for Medicare and Medicaid Services (CMS) 2009 base units for anesthesia. Payment is determined by adding the base units plus time units and multiplying the result by the CMS 2013 anesthesia conversion factor of \$22.57. Anesthesia Codes 01967 – 01969 are occurrence-based codes that are paid a flat rate. Anesthesia Codes 99100 – 99140 are not covered.



Methodology

- Reimbursement = Base Units x Time Units (time in minutes / 15) x Conversion Factor
- Base Units = Determined by CMS
- Time Units = Determined by provided service. Billed in minutes and converted into units a 15 minutes each.
- Conversion Factor (CF)= Set by locality from CMS. NV State Plan currently requires the use of 2013 CF.



Base Units

- Each year CMS publish the Base units by CPT 00100 – 01999.
- A spreadsheet is available for download which includes the base unit for each CPT code.
- These Units rarely change.

The screenshot shows the CMS.gov website with the following content:

- Spotlights:** CMS issued the [CY 2022 Medicare Physician Fee Schedule \(PFS\) final rule](#) that updates payment policies, payment rates, and other provisions for services. See a [summary of key provisions](#), effective on or after January 1, 2022.
- Important Links:**
 - Billing / Payment:**
 - [2022 Anesthesia Conversion Factors \(ZIP\)](#) (updated 12/20/21) - These are the anesthesia conversion factors used to compute allowable amounts for anesthesia services under CPT codes 00100 to 01999.
 - [2022 Anesthesia base units by CPT code \(ZIP\)](#) - These are the anesthesia base units used to compute allowable amounts for anesthesia services under CPT codes 00100 to 01999.
 - CMS Manuals & Transmittals:**
 - Medicare Claims Processing Manual
 - Payment for Anesthesiology Services [Medicare Claims Processing Manual \(Chapter 12. Physician/Nonphysician Practitioners\)](#) (PDF) (See Sub-Section K - Anesthesia Claims Claims Modifiers) contains the amount physicians and other providers will receive when providing services to a Medicare beneficiary

CODE	2022
	BASE
	UNIT
00100	5
00102	6
00103	5
00104	4



Conversion Factor

- Each year CMS updates the conversion factor for each locality. The Nevada State Plan currently requires the use of the Conversion Factor set in 2013.
- Conversion Factors by year:
 - 2011 – 21.49
 - 2012 – 22.14
 - **2013 – 22.57**
 - 2014 – 23.09
 - 2015 – 22.83
 - 2016 – 22.23
 - 2017 – 22.15
 - 2018 – 22.16
 - 2019 – 22.24
 - 2020 – 22.44
 - 2021 – 22.11
- High – 2014 at 23.09
- Low – 2021 at 22.11
- Median – 2016 at 22.23
- Average – 22.31



Example

- Situation: Patient receives anesthesia on a salivary gland with biopsy to which they receive 90 minutes.
- Current State Plan
 - CPT 00100
 - Base Units =5, Time Units = $90/15$ (6), CF = 22.57
 - $5 + 6 = 11$. $11 \times 22.57 = \$248.27$
- Average
 - CPT 00100
 - Base Units =5, Time Units = $90/15$ (6), CF = 22.31
 - $5 + 6 = 11$. $11 \times 22.31 = \$245.41$
- Median
 - CPT 00100
 - Base Units =5, Time Units = $90/15$ (6), CF = 22.23
 - $5 + 6 = 11$. $11 \times 22.23 = \$244.53$





Open Discussion

- This discussion is to gather information on the frontline costs and breakdown of cost that are associated with anesthesia.
- A consideration would be recipients such as pediatrics.



Questions?





Contact Information

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<https://dhcfp.nv.gov/Resources/Rates/RATESMAIN/>





Acronyms

- CPT – Current Procedural Terminology
- CF – Conversion Factor

Resources

- Center of Medicare & Medicaid Services
 - <https://www.cms.gov/Center/Provider-Type/Anesthesiologists-Center>
 - Medicare Claims Processing Manual – Chapter 26 – Completing and Processing Form CMS-1500 Data Set, Section 10.9.1
- NV Medicaid State Plan
 - Page 1 explains the methodology for anesthesia
 - <https://dhcfp.nv.gov/uploadedFiles/dhcfpnavgov/content/Resources/AdminSupport/Manuals/MSP/Sec4/5-4.19AttachBPayforMedCare.pdf>