

# MOLINA-OH-D | Utilization Review Criteria - Anesthesia Services

# Purpose

To ensure consistent and equitable determination of coverage for Anesthesia during dental services, following ODM Appendix A to rule 5160 and Molina Healthcare of Ohio Dental Provider Manual Clinical Criteria.

# Policy

It is expected that procedures performed will comply with these guidelines and exceptions are minimal. SKYGEN USA, LLC utilizes Ohio 5160-5-01, Molina Ohio Clinical Criteria, and EPSDT standards for members under 21.

# **Anesthesia**

Payment for anesthesia services includes analgesic and anesthetic agents

#### Intravenous moderate conscious sedation/analgesia Deep sedation/general anesthesia

- Anesthesia is generally covered for surgical or restorative procedures.
- Payment may also be made when a patient would not be unable to undergo a nonsurgical procedure without sedation.
- Payment for intravenous conscious sedation/analgesia services is limited to one unit of the first 15 minutes and up to four units of subsequent 15 minute increments per date of service.
- Payment for deep sedation/general anesthesia services is limited to one unit of the first 15 minutes and up to four units of subsequent 15 minutes increments per date of service.

## Additional Clinical Criteria:

## General anesthesia/IV sedation (dental office setting) - one or more of the criteria below

- PA not required
- Extractions of impacted or unerupted cuspids or wisdom teeth or surgical exposure of unerupted cuspids
- Two or more extractions in two or more quadrants
- Four or more extractions in one quadrant
- Excision of lesions greater than 1.25cm
- Surgical recovery from the maxillary antrum
- Documentation that patient is less than nine years old with extensive treatment (described)
- Documentation of failed local anesthesia and documentation noted in patient record
- Documentation of situational anxiety and documentation noted in patient record
- Documentation and narrative of Medical Necessity supported by submitted medical records (cardiac, cerebral palsy, epilepsy or condition that would render patient noncompliant)

#### Therapeutic drug injection

- Description of drugs (antibiotics, steroids, anti-inflammation or other therapeutic medication) and parental administration
- Documentation must be maintained in the patient's clinical record