

November 2016

Anesthesia Care Not Typically Required

by

A F Strobel, MD MBA CPC

This ASA Timely Topic is being written to elucidate a commonly questioned reference that is designated in the annually published ASA CROSSWALK® as “Anesthesia Care Not Typically Required” (ACNTR) and to explain the logic used by the editorial panel in its determination.

The ASA CROSSWALK, for those members who do not code their own claim submissions or are unaware of the ASA’s unrelenting commitment to correct coding, is a comprehensive guide that is published annually that identifies the anesthesia CPT® code (00100-01999), and alternate codes when appropriate, that most specifically describes the anesthesia service for a particular diagnostic or therapeutic CPT procedure code.

The ASA CROSSWALK is updated annually by an ASA Committee on Economics (COE) workgroup. New CPT procedure codes for the upcoming year are added along with the relevant anesthesia codes that should be considered when reporting anesthesia for those procedures. Any CPT codes that have been deleted from the AMA CPT Manual are similarly deleted from the ASA CROSSWALK. Also, any codes whose descriptions have been modified by the AMA CPT Editorial Panel are reviewed to determine whether those revisions change the anesthesia code that would typically be reported to describe anesthesia for that procedure. In addition, this COE workgroup performs a “rolling review” of a portion of the CROSSWALK such that the CROSSWALK is reviewed in its entirety at least once every five years.

The ASA CROSSWALK is meant to be used in conjunction with the present year’s corresponding AMA CPT publication and ASA Relative Value Guide® (RVG™). The ASA Relative Value Guide lists all anesthesia CPT codes and other CPT codes commonly reported by anesthesiologists, along with their base unit values and the appropriate use of time. Use of older versions of the ASA RVG or AMA CPT may lead to incorrect coding, claim denials or subsequent recoupment of payments. As such, it is important to use the editions that correspond to the year the service is provided.

Some CPT codes do not have an anesthesia code associated with them. In some such instances, the designation “Anesthesia Care Not Typically Required” is noted. The use of this designation is reserved for those instances in which it is unlikely that an anesthesia service would be provided to facilitate the performance of the procedure described by that CPT code. In some cases the use of anesthesia services would be rarely be required. However, as stated in the Introduction to the ASA CROSSWALK, “[i]t is important to note that

Notice: This memo was prepared by the author in his/her personal capacity. The opinions expressed within are the author’s own and do not reflect the view of the American Society of Anesthesiologists.

Timely Topics

PAYMENT AND PRACTICE MANAGEMENT

conditions may exist which make skilled anesthesia care necessary for procedures not normally requiring such care. Major co-morbidities and mental or psychological impediments to cooperation are examples of such conditions. Pediatric patients may require anesthesia care when adult patients would not.” When reporting anesthesia services for a procedure that is designated as “Anesthesia Care Not Typically Required”, it is good practice to document why anesthesia care is medically necessary in the medical records and, if possible, include ICD-10-CM diagnosis codes to support medical necessity of the anesthesia service.

Users should be aware that at the front of the ASA CROSSWALK is a form on which suggestions for changes or additions to the next year’s edition of the CROSSWALK can be submitted to the CROSSWALK Editor. The CROSSWALK Editorial Panel encourages users with suggestions to forward them for consideration.