

Prior authorization requirements for moderate to deep anesthesia for dental surgery in the facility setting

Please be aware that on **February 14, 2022**, prior authorization (PA) requirements will change for moderate to deep anesthesia for dental surgery in the facility setting, including hospital and ambulatory service centers. In addition to codes 00170 and 41899, the medical codes listed below will require PA by Amerigroup for members 0-20 years of age and younger, or members who are ICF-IID program members. Federal and state law, as well as state contract language and CMS guidelines, including definitions and specific contract provisions/exclusions, take precedence over these PA rules and must be considered first when determining coverage. PA will be required beginning February 14, 2022; those claims without PA will be denied.

What's changing?

PA requirements will continue for the following codes, and will now include members 0-20 years of age, or members who are ICF-IID program members:

- 00170 (Be sure to include U3 modifier per current process.) — Anesthesia for intraoral procedures, including biopsy; not otherwise specified
- 41899 — Unlisted procedure, dentoalveolar structures (for anesthesia services billed on a facility claim listing this code as the primary procedure)

PA requirements will be added to the following codes for members 0-20 years of age and younger or members who are ICF-IID program members:

- 99151 — Moderate sedation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of the patient's level of consciousness and physiological status; initial 15 minutes of intraservice time, patient younger than 5 years of age
- 99152 — Moderate sedation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of the patient's level of consciousness and physiological status; initial 15 minutes of intraservice time, patient age 5 years or older
- 99153 — Moderate sedation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of the patient's level of consciousness and physiological status; each additional 15 minutes of intraservice time
- 99155 — Moderate sedation services provided by a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports; initial 15 minutes of intraservice time, patient younger than 5 years of age

* Availity, LLC is an independent company providing administrative support services on behalf of Amerigroup.

<https://provider.amerigroup.com/TX>

Amerigroup members in the Medicaid Rural Service Area and the STAR Kids program are served by Amerigroup Insurance Company; all other Amerigroup members in Texas are served by Amerigroup Texas, Inc.

- 99156 — Moderate sedation services provided by a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports; initial 15 minutes of intraservice time, patient age 5 years or older
- 99157 — Moderate sedation services provided by a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports; each additional 15 minutes of intraservice time

Please note, to determine medical necessity, Amerigroup utilizes the Clinical UM Guideline *CG-MED-41 Moderate to Deep Anesthesia Services for Dental Surgery in the Facility Setting* in lieu of the *TMHP Criteria for Dental Therapy Under General Anesthesia*. This change has been vetted with the State. When submitting your request for prior authorization, please include the following information as appropriate:

- A complete prior authorization form
- Visit narrative or clinical notes
- Radiographs
- Signed treatment plan
- Explanation as to why this procedure cannot be accomplished in the office setting with nitrous oxide or sedation

To request PA, you may use one of the following methods:

- **Web:** <https://www.availity.com>*
- **Fax:** 800-964-3627
- **Phone:** 800-454-3730

Not all PA requirements are listed here. PA requirements are available to providers by accessing the Precertification Lookup Tool at <https://provider.amerigroup.com/texas-provider/resources/prior-authorization-requirements/precertification-lookup>, or for contracted providers at <https://www.availity.com>. Providers may also call Provider Services at **800-454-3730** for assistance with PA requirements.

To find more information

For more information about services requiring PA, visit <https://provider.amerigroup.com/texas-provider/resources/prior-authorization-requirements>. For more information on our PA process, please review the provider manual posted at <https://provider.amerigroup.com/texas-provider/resources/manuals-and-guides>.



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