Dental-Related General Anesthesia and Facility Charges - UM Clinical Coverage Guidance

PURPOSE

Provide Clinical Guidance for determining what medical services, procedures, devices, and drugs may be eligible for coverage and to evaluate whether a medical procedure or equipment is medically necessary. Providers are responsible for verifying eligibility and benefits before providing services to all Denver Health Medical Plan (DHMP) members.

Important Information - Please Read Before Using This Departmental Operating Procedure (DOP)

The following coverage policy applies to health benefit plans administered by DHMP and may not be covered by all DHMP plans. Please refer to the member’s benefit document for specific coverage information. If there is a difference between this general information and the member’s benefit document, the member’s benefit document will be used to determine coverage. For example, a Member’s benefit document may contain a specific exclusion related to a topic addressed in a coverage policy.

Coverage determinations for individual requests require consideration of:

- The terms of the applicable benefit document in effect on the date of service.
- Any applicable laws and regulations.
- Any relevant collateral source materials including coverage policies.
- The specific facts of the particular situation.

Contact DHMP Customer Service to discuss plan benefits more specifically.

SCOPE

This Clinical Coverage Guidance applies to DHMP Utilization Management Department and all lines of business.

DEFINITIONS

Alternate Facility - A freestanding health care facility that is:

- Not a Physician’s or dentist’s office.
- Not a Hospital.
• Not a facility that is attached to a Hospital.
• Is designated by the Hospital as an Alternate Facility
• Can be an ambulatory surgical center or dialysis center, for example.

**General Anesthesia** - Drug-induced loss of consciousness during which the patient is not arousable, even by painful stimulation. The ability to maintain ventilatory function independently often is impaired. Patients often require assistance in maintaining a patent airway, and positive pressure ventilation may be required because of depressed spontaneous ventilation or drug-induced depression of neuromuscular function. Cardiovascular function may be impaired. Pediatric Patient. All patients who are infants, children, and adolescents less than the age of majority (18 years old).

**Restoration** - A surgical procedure that is intended to restore an individual’s anatomy to normal function and/or appearance.

**PROCESS**

**CLINICAL COVERAGE GUIDELINE**

DHMP follows guidelines from the American Academy of Pediatric Dentistry (AAPD, 2004 and 2005).

DHMP Health Plan considers general anesthesia and facility charges in a hospital or outpatient surgical setting medically necessary for certain dental services when any the following guidelines are met.

A. The anesthesia must be rendered by a provider other than the provider performing the dental service. All facility charges incurred in association with the anesthesia charges are covered under the medical/surgical benefit if any one of the following criteria are met:

1. Patients, including infants, exhibiting physical, intellectual, or medically compromising conditions, for which dental treatment under local anesthesia, with or without additional adjunctive techniques and modalities, cannot be expected to provide a successful result and which, under general anesthesia, can be expected to produce a superior result. Conditions include but are not limited to mental retardation, cerebral palsy, epilepsy, cardiac problems and hyperactivity (verified by appropriate medical documentation); OR

2. The extremely uncooperative, fearful, anxious, or patient with dental needs of such magnitude that treatment should not be postponed or deferred and for who lack of treatment can be expected to result in dental or oral pain, infection, loss of teeth, or other increased oral or dental morbidity; OR

3. A total of six or more teeth are extracted in various quadrants, OR

4. Dental treatment needs for which local anesthesia is ineffective because of acute infection, anatomic variation, or allergy, OR

5. The member is a child under the age of seven years old, with a dental condition that requires repairs of significant complexity (e.g., multiple amalgam and/or resin-based composite restorations, pulpal therapy, extractions or any combination of these); OR

6. Patients with a concurrent hazardous medical condition; OR

7. Extensive oral-facial and/or dental trauma for which treatment under local anesthesia would be ineffective or compromised.

**COVERED CODES**

**Anesthesia**
CPT 00170 - Unlisted anesthesia procedure(s)
Benefits and Coverage, Dental-Related General Anesthesia

Facility charge
CPT 41899 - Other Procedures on the Dentoalveolar Structures

ICD-10 DIAGNOSIS CODES

Code Description
F43.0, 308.3 Acute stress reaction
F90.1 Attention-deficit hyperactivity disorder, predominantly hyperactive type
F90.2 ... combine type
F90.9 ... unspecified type
F95.2 Tourette’s disorder
F70 Mild intellectual disabilities
F79 Unspecified intellectual disabilities
G80.0 Spastic quadriplegic cerebral palsy
G80.1 Spastic diplegic cerebral palsy
G80.2 Spastic hemiplegic cerebral palsy
G80.8 Other cerebral palsy
G80.9 Cerebral palsy, unspecified
G40.101 – G40.109 Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with simple partial seizures, not intractable
G40.201 – G40.209 Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with complex partial seizures, not intractable
G40.301 Generalized idiopathic epilepsy and epileptic syndromes
G40.309 – G40.409 Generalized epilepsy and epileptic syndromes
G40.501 – G40.509 Epileptic seizures related to external causes, not intractable
G40.821 – G40.822 Epileptic spasms, not intractable
G40.901 – G40.909 Epilepsy, unspecified, not intractable
K00.0 – K00.9 Disorders of tooth development and eruption

ICD-10 DIAGNOSIS CODES

Code Description
K01.0 – K01.1 Embedded and impacted teeth
K02.3 – K02.9 Dental caries
K03.0 – K03.9 Other diseases of hard tissues of teeth
K04.0 – K04.99 Diseases of pulp and periapical tissues
K05.00 – K06.9 Gingivitis and periodontal diseases
K08.0 – K08.9 Other disorders of teeth and supporting structures
M26.70 – M26.79 Dental alveolar anomalies
M26.81 – M26.82 Soft tissue impingement, anterior or posterior
Q90.9 Down syndrome, unspecified
R56.1 Post traumatic seizures
R56.9 Unspecified convulsions

DOCUMENTATION/RECORDS

N/A

EXTERNAL REFERENCES


DHMP/DHHA RELATED DOCUMENTS

None

Attachments

No Attachments

Approval Signatures

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Applicability

Denver Health Medical Plan (DHMP)