

Prior authorization requirements for Moderate to Deep Anesthesia for Dental Surgery in the Facility Setting

Effective **January 4, 2021**, prior authorization (PA) requirements will change for the following: Moderate to Deep Anesthesia for Dental Surgery in the Facility Setting (includes Hospital and Ambulatory Service Centers). The medical codes listed below will require PA by Anthem Blue Cross and Blue Shield. Federal and state law, as well as state contract language and Centers for Medicare & Medicaid Services guidelines, including definitions and specific contract provisions/exclusions take precedence over these PA rules and must be considered first when determining coverage. **Noncompliance with new requirements shall result in denied claims.**

PA requirements will be added to the following codes when K02.9 (Dental Caries, unspecified) is included as a diagnosis:

- **00170** — 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)
- **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
- **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

* Availity, LLC is an independent company providing administrative support services on behalf of Anthem Blue Cross and Blue Shield.

<https://mediproviders.anthem.com/wi>

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

- **Web:** <https://www.availity.com>
- **Fax:** 1-800-964-3627
- **Phone:** 1-855-558-1443

Not all PA requirements are listed here. PA requirements are available to contracted providers by accessing the Provider Self-Service Tool at <https://www.availity.com> by visiting <https://mediproviders.anthem.com/wi> > Login. Contracted and noncontracted providers who are unable to access Availity* may call Provider Services at 1-855-558-1443 for PA requirements.