

Provider Bulletin – Anesthesia

Reference: B1800416



Physician Services, Clinic Practitioners, Non-Physician Practitioners - Group, Certified Registered Nurse Anesthetists (CRNAs)

1 Anesthesia Payment Policy Changes

DXC Contacts

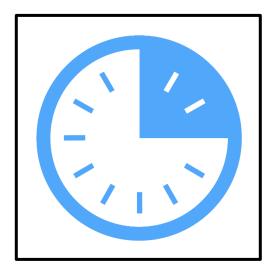
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Anesthesia Payment Policy Changes

The Colorado Department of Health Care Policy & Financing (the Department) is changing its general anesthesia payment policy to align with the largest number of payers, including Medicare. This is consistent with stakeholder feedback at the April 2017 Benefits Collaborative.

Claims submitted on or after March 1, 2017, with dates of services through May 31, 2018, must be billed in 15-minute increments to ensure the reimbursement reflects the rounding policy effective for those dates of service. For example, an anesthesia procedure lasting 14 minutes should be billed as 15 minutes, and will be reimbursed as 1 unit. Any claims not submitted in 15-minute increments for dates of service before May 31, 2018, should be adjusted to be accurately reimbursed. The Department will work with providers to address any timely filing issues that might arise.

Beginning June 1, 2018, providers should bill the exact number of minutes during which services were provided and should not round up to the next fifteen-minute increment. The Department will reimburse the exact number of minutes reported on the claim.

Contact Jesse Durfee at <u>Jesse.Durfee@state.co.us</u> with questions concerning this policy.