

Part B Insider (Multispecialty) Coding Alert

EMERGENCY MEDICINE: Bill New Moderate Sedation Codes--Even If They Don't Pay

Medicare is watching your usage of these codes

Medicare never paid for conscious sedation in the past, but some observers are hopeful things will be different for moderate sedation.

CPT 2006 introduced six new codes for "moderate sedation" (99143-99150) and deleted two old "conscious sedation" codes (99141-99142). For now, the new codes have a status of "C," meaning "carrier-priced."

"Unfortunately, carrier-priced often means zero" for reimbursement, says **David McKenzie**, director of reimbursement with the **American College of Emergency Physicians**. But there is something you can do.

Act now: Now's the time to encourage your local Part B carrier to reimburse these codes, say experts. The carriers can come out with Local Coverage Determinations (LCDs) for these codes, notes **Steven Verno**, director of reimbursement for **Emergency Medicine Specialists** in Hollywood, FL. **United Healthcare** has promised on its Web site to introduce a policy on these codes in its March 2006 provider newsletter.

Already, some Medicaid programs will pay for moderate sedation for children. For example, if a child comes in with a high fever and the doctor suspects meningitis, the doctor may need to give the patient a spinal tap under moderate sedation, says Verno.

The **Relative Value Update Committee** (RUC) suggested adequate national RVU values for the moderate sedation codes, the **American Association of Family Physicians** noted in its comments on the 2006 physician fee schedule.

But the **Centers for Medicare & Medicaid Services** said it wanted more data first. "We are uncertain whether the RUC-assigned values are appropriate and have carrier-priced these codes in order to gather information for utilization and proper pricing," CMS said in the Nov. 21, 2005 Federal Register (page 70282).

In other words, it's in your interest to bill these codes now--even if you may not get paid. That way, CMS will gain more information on utilization, and hopefully add national RVUs next year.

Best advice: For now, the best thing you can do is check with your own carrier on how it wants these codes to be reported, says McKenzie.