

## Part B Insider (Multispecialty) Coding Alert

### How Can You Bill for Aborted Anesthesia?

#### 4 tips for billing for anesthesia with canceled procedures

If the surgeon or anesthesiologist cancels a procedure halfway through, it can be tricky to receive payment (see story , "The Patient Is Sedated, the Surgeon Calls It Quits: What Should You Bill?"). But here are a few tips:

Don't bill for aborted anesthesia if the procedure happens again the next day. "That's going to look really funny," says **Barbara Johnson** with Loma Linda University Anesthesiology Medical Group in Loma Linda, Calif.

It will especially look suspicious to Medicare if you bill for a consult one day and then a procedure the next day, says **Lee Broadston**, president and CEO of BCS in Waconia, Minn.

If you induce the patient and then the case has to be halted, bill for whatever you got done, Johnson says. Bill whichever ASA or CPT Codes you would have normally billed for and then add the physical status modifier and modifier -53 (Discontinued procedure) for the discontinued service. "We bill three base units plus our time," Johnson says.

Johnson says it's best to list the reason you canceled the surgery as the first diagnosis, and the reason the patient was originally going to have surgery as the second. "It looks pretty hokey sometimes" to list a heart attack as the main diagnosis for a patient who was having a knee arthroscopy. But it will make sense to the carriers, Johnson says.

"We're telling them the case is canceled with a -53, and it was after the induction, which is what the description says, and then we're giving them the reason why," Johnson says.

But **Patrick Cafferty**, president and CEO of Neurosurgical Associates of Western Kentucky, says he prefers to use the diagnosis for the surgery that was being performed first, and then the diagnosis that caused the cancellation.

For monitored anesthesia care patients, you should consider it the same as induction if you medicate the patient to calm her. "If we've given them enough medication that they're going to be sleepy and we're going to have to hold them for a while, I basically consider that induction on a MAC," Johnson says.