



Department of Medicaid

John R. Kasich, Governor

Barbara R. Sears, Director

Medicaid Transmittal Letter (MTL) No. 3336-16-06

DATE: December 26, 2016

TO: Eligible Non-Institutional Medicaid Providers of Anesthesia Services
Chief Executive Officers, Managed Care Plans
Other Interested Parties

FROM: Barbara R. Sears, Medicaid Director

SUBJECT: Revision of Anesthesia Rules

Changes

Existing rule 5160-4-21, "Anesthesia services," sets forth provisions for coverage, payment, and management of anesthesia services performed by physicians, certified registered nurse anesthetists, or anesthesiologist assistants. This rule has been rescinded, and its relevant provisions have been incorporated into new rule 5160-4-21.

Existing rule 5160-4-21.1, "Anesthesia for neuraxial analgesia for obstetrical services," sets forth provisions for coverage, payment and management of anesthesia services provided during labor and delivery. This rule has been rescinded, and its relevant provisions have been incorporated into new rule 5160-4-21.

Existing rule 5160-4-21.2, "Anesthesia conversion factors," sets forth anesthesia conversion factors used to establish maximum payment amounts. This rule has been rescinded, and the information in it has been converted into an appendix to new rule 5160-4-21.

Existing rule 5160-8-26, "Anesthesiologist assistant (AA) services: eligible providers and coverage and limitations," sets forth provisions for coverage and payment of anesthesia services rendered by anesthesiologist assistants. This rule has been rescinded, and its relevant provisions have been incorporated into new rule 5160-4-21.

New rule 5160-4-21, "Anesthesia services," sets forth provisions for coverage, payment, and management of anesthesia services performed by physicians, certified registered nurse anesthetists, or anesthesiologist assistants. Medicaid payment policy for anesthesia services has been reorganized, streamlined, and clarified. The relevant content of rules 5160-4-21, 5160-4-21.1, and 5160-4-21.2, and 5160-8-26 has been combined into a single new rule with an appendix. References to other Medicaid rules have been modified to comport with the new agency designation (5160) within the Ohio Administrative Code.

These changes are effective for dates of service beginning January 1, 2017.

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Additional Information

Information about the services and programs of the Ohio Department of Medicaid (ODM) may be accessed through the main ODM web page, <http://www.medicaid.ohio.gov>.

Questions pertaining to this letter should be directed to the Ohio Department of Medicaid:

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