



## Department of Health Care Services Medi-Cal Dental Program General Anesthesia Report

Reporting Period: Calendar Year 2021 Published Date: January 2023

## Scope and Methodology

Pursuant to Welfare & Institutions Code Section14132.915(a)(3)(F) and (j)(3), general anesthesia (GA) utilization is based on Medi-Cal members who required and received GA services for dental procedures through Medi-Cal dental and medical delivery systems. Medi-Cal dental is administered through two delivery systems – Fee-for-Service (FFS) and Dental Managed Care (DMC). A Medi-Cal member can receive GA either through a dental office visit for an authorized dental procedure that requires GA and is billed through dental claims, or through a hospital visit for emergency room, inpatient, and outpatient dental services that require GA and are billed through medical claims. This report captures GA requests and utilization for Medi-Cal members whose provider's oral health treatment planning included approved Treatment Authorization Requests (TAR) for GA in dental offices, during Calendar Year (CY) 2021 (January 1, 2021 through December 31, 2021). Members who received GA are captured by dates of service in CY 2021 in both dental office and hospital settings and sorted by dental delivery system and age group: children ages 0-20 and adults age 21 and older.

GA services billed through dental and medical claims are identified by the Current Dental Terminology (CDT) codes and Current Procedural Terminology (CPT) codes outlined below. Medi-Cal providers have six (6) months from the TAR approval date to render the service and one year from the date of service to submit the claim to Medi-Cal for reimbursement. Therefore, the number of TARs approved is higher than the number of services rendered for the same period, as time is needed to render services and process claims for payment.

CDT Codes: D9222 and D9223 are used to identify GA services in dental offices. D9222 covers the first 30 minutes of GA and D9223 is for the subsequent 15 minute intervals.

CPT Codes: 00170 and 41899 are used to identify GA services in medical claims. CPT 00170 is the anesthesia on mouth for CDT procedures (D0100-D9999) and CPT 41899 is for dental surgery.

GA utilization has increased in CY 2021 when compared to CY 2020<sup>1</sup> due to dental office closures in CY 2020 per the COVID-19 Public Health Emergency (PHE), GA services were limited; however, TAR volume and approvals has subsequently increased

<sup>&</sup>lt;sup>1</sup> <u>Medi-Cal Dental General Anesthesia Report Calendar Year 2020</u>





in CY 2021. When CY 2021 data compared to CY 2019<sup>2</sup>, TARs across all age groups increased by 68 percent in FFS and 132 percent in DMC, while the GA services in dental offices increased by 15 percent in FFS and 93 percent in DMC. The reason for this increase could be the pending approvals from CY 2020 and subsequent utilization in CY 2021 likely due to the COVID-19 PHE.

## CY 2021 GA Results

Number of Members	FFS Children (Age 0-20)	FFS Adults (Age 21+)	DMC Children (Age 0-20)	DMC Adults (Age 21+)
Approved TARs for GA	76,937	33,234	3,922	1,538
Received GA in a dental office	50,373	18,807	3,335	1,068
Received GA in a hospital	5,266	692	97	20

Data Source: DHCS Dental Fiscal Intermediary Data Warehouse and DMC Annual Reports as of November 2022 for dental TARs approved in CY 2021 and claims with date of service CY 2021. DHCS MIS/DSS Data Warehouse as of November 2022 for medical claims with date of service CY 2021.

<sup>&</sup>lt;sup>2</sup> Medi-Cal Dental General Anesthesia Report Calendar Year 2019