



## Attention Anesthesia Billing Providers

### Issues Concerning Non-OB Anesthesia Services and Claims

DHH has completed a review of Shared Plan claims (UHC and CHS) for non-obstetrical anesthesia which denied for error code 735 (Previously Paid Anesthesia or Supervising Anesthesia – Same Recipient/Date of Service). The findings identified numerous provider billing errors that are not consistent with established Louisiana Medicaid policies for billing these services. The review validated the original denial reason on these claims.

These errors included but were not limited to:

- Services billed involving both an anesthesiologist and a CRNA; the claim for the CRNA was billed with a different procedure code than the anesthesiologist.
- Where CRNAs were directed by anesthesiologists, the minutes on the CRNA and the anesthesiologist claims were different.
- Services billed for two procedures where one procedure is included in the other procedure.
- Claims for the same service/same date were billed by two different anesthesiologists and two different CRNAs for the same procedure.
- Improper anesthesia modifier combinations.
- Claims were re-submitted multiple times with changes made to include inappropriate modifiers.

These denied claims will **not** be reprocessed as that only would result in claims receiving the same denial. Billing providers are reminded that when billing UHC, CHS or Legacy Medicaid for non-obstetrical anesthesia claims, they should follow national coding standards and also consult the on-line Professional Services Providers Services Manual at [www.lamedicaid.com](http://www.lamedicaid.com), directory link Provider Manuals, for specific billing instructions.