



# DIVISION OF MEDICAL SERVICES PROVIDER BULLETIN

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## Physician/CRNA/AA Bulletin Moderate (Conscious) Sedation

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- Conscious Sedation

#### Conscious Sedation

Moderate (Conscious) Sedation includes: Assessment of the patient, establishment of IV access, administration of agent(s), maintenance of sedation, monitoring of oxygen saturation, heart rate, and blood pressure, and recovery. The following codes are payable by Missouri Medicaid:

CPT CODE	Max Quantity	Allowable	Effective Date
99143	1 per day	\$ 31.17	04/01/2007
99144	1 per day	\$ 47.23	04/01/2007
99145	8 per day	\$ 11.72	04/01/2007
99148	1 per day	\$ 31.17	04/01/2007
99149	1 per day	\$ 47.23	04/01/2007
99150	8 per day	\$ 11.72	04/01/2007

Code 99143 describes Moderate Sedation provided by the same physician performing the diagnostic or therapeutic service that the sedation supports for patients under 5 years of age for the first 30 minutes of intra-service time.

Code 99144 describes Moderate Sedation provided by the same physician performing the diagnostic or therapeutic service that the sedation supports, for patients 5 years of age or older, for the first 30 minutes of intra-service time.

Code 99145 describes each additional 15 minutes of intra-service time. This is an add-on code to be used in conjunction with 99143 or 99144.

Code 99148 describes Moderate Sedation provided by a physician, Certified Registered Nurse Anesthetist (CRNA), or Anesthesiologist Assistant (AA) other than the health care professional performing the diagnostic or therapeutic service that the sedation supports, for patients under 5 years of age, for the first 30 minutes.

Code 99149 describes Moderate Sedation provided by a physician, Certified Registered Nurse Anesthetist (CRNA), or an Anesthesiologist Assistant (AA) other than the health care professional performing the diagnostic or therapeutic service that the sedation supports, for patients 5 years of age or older, for the first 30 minutes.

Code 99150 describes each additional 15 minutes of intra-service time. This is an add-on code to be used in conjunction with 99148 or 99149.

The following list of procedures includes conscious sedation as an inherent part of providing the procedure. These codes are identified in the CPT © codebook with a symbol. Since these services include moderate sedation, it is not appropriate for the same physician to bill the service codes listed below and the sedation codes 99143-99145.

19298, 20982, 22526, 22527 31615, 31620, 31622-31625, 31628-31629, 31635, 31645-31646, 31656, 31725, 32019-32020, 32201, 33010-33011, 33206-33208, 33210-33214, 33216-33218, 33220, 33222-33223, 33233-33235, 33240-33241, 33244, 33249, 35470-35476, 36555, 36557-36558, 36560-36561, 36563, 36565-36566, 36568, 36570-36571, 36576, 36578, 36581-36583, 36585, 36590, 36870, 37184-37186, 37187-37188, 37203, 37210, 37215-37216, 43200-43202, 43204-43205, 43215-43217, 43219-43220, 43226-43228, 43231-43232, 43234, 43235-43251, 43255-43265, 43267-43272, 43453, 43456, 43458, 43750, 44360-44361, 44363-44366, 44369-44370, 44372-44373, 44376-44380, 44382-44383, 44385-44386, 44388-44394, 44397, 44500, 44901, 45303, 45305, 45307, 45308-45309, 45315, 45317, 45320-45321, 45327, 45332-45335, 45337-45342, 45345, 45355, 45378-45387, 45391-45392, 47011, 48511, 49021, 49041, 49061, 50021, 50382, 50384, 50387, 50592, 58823, 66720, 69300, 77600, 77605, 77610, 77615, 92953, 92960-92961, 92973-92975, 92978-92982, 92984, 92986-92987, 92995-92996, 93312-93318, 93501, 93505, 93508, 93510-93511, 93514, 93524, 93526-93533, 93539-93545, 93555-93556, 93561-93562, 93571-93572, 93609, 93613, 93615-93616, 93618-93622, 93624, 93640-93642, 93650-93652

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**Missouri Medicaid News:** Providers and other interested parties are urged to go to the DMS Web site at <http://dss.missouri.gov/dms/global/pages/mednewssubscribe.htm> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official Missouri Medicaid communications via E-mail.

**MC+ Managed Care:** The information contained in this bulletin applies to coverage for:

- MC+ Fee-for-Service
- Medicaid Fee-for-Service
- Services not included in MC+ Managed Care

Questions regarding MC+ Managed Care benefits should be directed to the patient's MC+ Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the red MC+ card or by calling the Interactive Voice Response (IVR) System at 573-635-8908 and using Option One.

**Provider Communications Hotline**  
573-751-2896