



**PRICING GUIDELINES**

**EFFECTIVE DATE:** 11/1/2018  
**REVISION DATE:**

**Changes:** Claims processed on or after 11/1/2018, anesthesia time minutes are rounded to "nearest" whole anesthesia time unit.

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**MATERNITY EPIDURAL ANESTHESIA**

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Coverage for services, procedures, medical devices and drugs are dependent upon benefit eligibility as outlined in the member's specific benefit plan. This Pricing Guideline must be read in its entirety to determine coverage eligibility, if any.

The section identified as "Description" defines or describes a service, procedure, medical device or drug and is in no way intended as a statement of medical necessity and/or coverage.

The section identified as "Criteria" defines criteria to determine whether a service, procedure, medical device or drug is considered medically necessary or experimental or investigational.

Pricing Guidelines are subject to change as new information becomes available.

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**Description:**

Maternity epidural anesthesia, or neuraxial labor analgesia, represents regional anesthesia during labor and delivery for either a vaginal or a Cesarean section delivery. The anesthesia provider places a catheter into the epidural space of the spinal canal delivering analgesic/anesthetic medications that provide adequate analgesia for labor and subsequent delivery.

For claims processed on or after 11/1/2018, BCBSAZ rounds anesthesia time minutes to the "nearest" whole anesthesia time unit, instead of the "next" whole anesthesia time unit.

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**Criteria:**

The following reimbursement methodology is used to assess and reimburse maternity epidural anesthesia services:

➤ CPT Codes that identify maternity epidural anesthesia are: 01960, 01961, 01967, 01968.

➤ Reimbursement methodology reflects:

Base Units + Modifier Units + Time Units = Total Units



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**MATERNITY EPIDURAL ANESTHESIA (cont.)**

**Criteria:** (cont.)

The following reimbursement methodology is used to assess and reimburse maternity epidural anesthesia services: (cont.)

**Base Units:** The number of anesthesia base units will depend on the anesthesia CPT Code being submitted (01960, 01961, 01967, 01968). For appropriate base units, access the secure provider portal at [azblue.com/provider](http://azblue.com/provider) and locate the “Anesthesia Base Unit” document using the following path: “Provider Resources > Claim Pricing > Anesthesia Base Units”

**Modifier Units:** The number of anesthesia modifier units will depend on the modifier being submitted. For appropriate modifier units, access the secure provider portal at [azblue.com/provider](http://azblue.com/provider) and locate the “Modifier Pricing Actions” document using the following path: “Provider Resources > Claim Pricing > Modifier Pricing Actions Lists”

**Time Units:** Anesthesia time units are derived by the amount of time the anesthesiologist administers the anesthesia face-to-face to the patient. Each 15 minute increment represents 1 unit of service.

Claims processed prior to 11/1/2018: Any additional time over the 15 minute increment would add one additional time unit. (Round up to the “next” whole time unit.) Examples:

Process Prior 11/1/2018	
Minutes	Units
1 - 15	1
16 - 30	2
31 - 45	3
46 - 60	4

Claims processed on 11/1/2018 and after: Fractions of the 15 minute increment must be over 7.50 minutes to allow for an additional time unit. (Round to the “nearest” whole time unit.) Examples:

Process on 11/1/2018 and After	
Minutes	Units
1 - 7	0
8 - 22	1
23 - 37	2
38 - 52	3
53 - 67	4



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**MATERNITY EPIDURAL ANESTHESIA (cont.)**

**Criteria:** (cont.)

**The following reimbursement methodology is used to assess and reimburse maternity epidural anesthesia services:** (cont.)

**Time Units:** (cont.)

- NOTES:** (1) **Maximum of 24 Maternity Epidural Anesthesia Time Units** allowed per encounter (*i.e. services from the same provider for the same patient and date of service*). Providers are required to bill the number of maternity epidural anesthesia time units to accurately reflect the actual time the epidural was administered.
- (2) If multiple anesthesiologists are rendering services for the same patient and on the same encounter, each can get reimbursed for the maximum 24 time units provided that they bill with the appropriate fee reduction modifiers (e.g. QX, QK, etc.). For additional coding information on multiple anesthesiologists billing on same encounter, refer to the "*Anesthesia Pricing Guidelines*" Section **F - Billing Criteria of Anesthesia Modifiers** in [azblue.com/provider](http://azblue.com/provider), using the following path: "Provider Resources > Claim Pricing > Anesthesia Pricing Guidelines"



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**MATERNITY EPIDURAL ANESTHESIA (cont.)**

**Pricing Examples:**

**Pricing Example 1:** (Anesthesia claim for maternity epidural – Anesthesia Time Units within Maximum):

Anesthesia Time: 12:00 – 6:00 (6 hours = 360 minutes. divided by 15 minutes = 24 Time Units)  
 Procedure Code: 01967 (5 Base Units)  
 Modifier: P3 (1 Additional Unit)

$$\begin{array}{cccc} \text{Base Units} & + & \text{Modifier Units} & + & \text{Time Units} & = & \text{Total Units} \\ 5 & & 1 & & 24 & & 30 \end{array}$$

**Pricing Example 2:** (Anesthesia claim for maternity epidural – Anesthesia Time Units Over Maximum):

Anesthesia Time: 12:00 – 7:00 (7 hours = 420 minutes. divided by 15 minutes = 28 Time Units)  
 Procedure Code: 01967 (5 Base Units)  
 Modifier: P3 (1 Additional Unit)

$$\begin{array}{cccc} \text{Base Units} & + & \text{Modifier Units} & + & \text{Time Units} & = & \text{Total Units} \\ 5 & & 1 & & 24 \text{ (Not 28)} & & 30 \\ & & & & \text{(Maximum Time)} & & \end{array}$$



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**MATERNITY EPIDURAL ANESTHESIA (cont.)**

**Pricing Examples:** (cont.)

**Pricing Example 3:** [Anesthesia claim submitted with **TWO** epidural codes (e.g. **01967 & 01968**) – Anesthesia Time Units Over Maximum]

**NOTE:** Maximum of 24 Time Units for entire claim.

Codes are as follows:

**1<sup>st</sup> Code: 01967 – P3:**

Anesthesia Time: 12:00 - 6:15 (6.25 hrs. = 375 min. divided by 15 min. = 25 Time Units)

Base Units: 5 Base Units

Modifier P3: 1 Modifier Unit

**2<sup>nd</sup> Code: 01968 – P3:**

Anesthesia Time: 6:15 – 7:00 (45 mins. divided by 15 min. = 3 Time Units)

Base Units: 3 Base Units

Modifier P3: 1 Modifier Unit

	<u>Base Units</u>	<u>+ Modifier Units</u>	<u>+ Time Units</u>	<u>= Total Units</u>
<b>01967:</b>	5	1	24 (Not 25) (Maximum Time)	30
<b>01968:</b>	3	1	0 (Max on 01967)	4



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**MATERNITY EPIDURAL ANESTHESIA (cont.)**

**Resources:**

1. Blue Cross Blue Shield of Arizona Coding Guidelines
  2. Current Procedural Terminology (CPT®), American Medical Association
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**Coding:**

CPT: 01960, 01961, 01967, 01968

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