Service Limits for CDT Anesthesia/Sedation Codes D9221 and D9242

Dental providers (provider type 22) are advised that CDT codes D9221 (Deep sedation/general anesthesia, each additional 15 minutes) and D9242 (Intravenous conscious sedation/analgesic, each additional 15 minutes) billed by provider type 22 are limited to three (3) units per day, per recipient.

Any combination of claims for D9221 and/or D9242 that exceed three (3) units (or 45 minutes) will be denied. D9220 (Deep sedation/general anesthesia, first 30 minutes) and D9241 (Intravenous conscious sedation/analgesic, first 30 minutes) can continue to be billed in conjunction with D9221 and D9242.

The Coverage, Limitations and Prior Authorization Requirements for the Nevada Medicaid and Nevada Check Up Dental Program document has been updated to reflect this information. This document is accessed from the Provider Type 22 Billing Guide, page 1.