To: Gastroenterologists and Colorectal Surgeons  
Contracts Affected: All Lines of Business

Anesthesia for Upper and Lower Gastrointestinal Procedures

Effective September 1, 2009, BlueShield of Northeastern New York will require preauthorization for the use of anesthesia services or monitored anesthesia care (MAC) during gastrointestinal (GI) diagnostic or therapeutic endoscopy that is administered by an anesthesia provider.

In general, GI endoscopy procedures are performed under moderate sedation when given by, or under the supervision of, the physician performing the endoscopy.

Should you decide to engage an anesthesia provider for any patient age 12 through 69, you will be required to provide documentation indicating that one of the following risk factors or significant medical conditions* were present:

- Prolonged or therapeutic endoscopic procedure requiring deep sedation
- Increased risk for complications due to severe co-morbidity (American Society of Anesthesiologists/ASA class III or greater)
- History of, or anticipated intolerance to, standard sedatives
- Patient is pregnant
- Patients with active medical problems related to drug or alcohol abuse
- Patient is acutely agitated, uncooperative
- Patients with increased risk for airway obstruction due to anatomic variation

To obtain a preauthorization, please fax your request to our Use Management Department at 1-716-887-7913 and include documentation as indicated above.

*These qualifying situations are based on a national standard criterion set.

Note: Use of anesthesia or MAC is not considered medically necessary for standard GI endoscopic procedures in patients with average risk. If prior approval has not been obtained, the anesthesiologist’s claims will be subject to processing delay and a potential denial.

The CPT and HCPCS codes pertaining to upper and lower GI procedures are:

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