General Anesthesia and Conscious Sedation Services (For Ohio Only)

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Related References and Policies

- UnitedHealthcare Community Plan of Ohio Medicaid Dental Quick Reference Guide
- Dental Provider Manual: UnitedHealthcare Community Plan of Ohio

Application

This Dental Policy only applies to the state of Ohio. Any requests for services that are stated as unproven or services for which there is a coverage or quantity limit will be evaluated for medical necessity using Ohio Administrative Code 5160-1-01. Early and periodic screening, diagnostic, and treatment (EPSDT) covered dental service considerations are applied to members younger than age 21 years of age pursuant to Ohio Administrative Code 5160-1-14(C)(3).

Prior Authorization

The Ohio Department of Medicaid (ODM) determines coverage of dental services based on medical necessity, alignment with policy criteria, and clinical indications. CDT codes that are designated as covered by ODM are eligible for reimbursement when all applicable guidelines are met. For a comprehensive list of covered CDT codes, refer to the UnitedHealthcare Community Plan of Ohio Medicaid Dental Quick Reference Guide and/or Dental Provider Manual: UnitedHealthcare Community Plan of Ohio.

Non-covered codes may be reimbursable if special justification is submitted to include prior-authorization, clinical narrative of medical necessity, and supporting documentation including but not limited to clinical records, diagnostic imaging, periodontal charting, or any other relevant documentation to support the clinical rationale.

Description of Services

The administration of local anesthetic is common and used for most routine dental procedures. For some patients, various levels of sedation and/or anesthesia may be necessary to safely provide dental care. These procedures generally are safe when administered by trained, certified providers in the appropriate setting, but are not without risk.

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Definitions

Deep Sedation: A drug-induced depression of consciousness during which patients cannot be easily aroused but respond purposefully following repeated or painful stimulation. The ability to independently maintain ventilatory function may be impaired. Patients may require an advanced airway to maintain a patent airway, and spontaneous ventilation may be inadequate. Cardiovascular function is usually maintained. (ASA)

General Anesthesia: A drug-induced loss of consciousness during which patients are not arousable, even by painful stimulation. The ability to independently maintain ventilator function is often impaired. Patients often require an advanced airway to maintain a patent airway, and positive pressure ventilation may be required because of depressed spontaneous ventilation or drug-induced depression of neuromuscular function. Cardiovascular function may be impaired. (ASA)

Local Anesthesia: The elimination of sensation, especially pain, in one part of the body by the topical application or regional injection of a drug. (ADA)

Moderate Sedation ("Conscious Sedation"): A drug-induced depression of consciousness during which patients respond purposefully to verbal commands, either alone or accompanied by light tactile stimulation. No interventions are required to maintain a patent airway, and spontaneous ventilation is adequate. Cardiovascular function is usually maintained. (ASA)

Non-Intravenous Sedation: Sedation medications that are delivered though the oral, intranasal, or transmucosal routes. (Thomas, 2015)

Clinical Indications

Covered Codes

CDT Code	Age Limits	Frequency Limits	Authorization Required	Required Documentation
D9222	0-999	1 per 1 day per member	No	N/A
D9223	0-999	4 per 1 day per member	No	N/A
D9230	0-20	N/A	N/A	N/A
D9230	21-999	N/A	Yes	Narrative of medical necessity
D9239	0-999	1 per 1 day per member	No	N/A

Note: This policy applies to services provided in a dental office. For anesthesia services provided in a hospital operating room or ambulatory surgery center, refer to the member specific benefit plan document and any applicable federal or state mandates.

Nitrous Oxide

Nitrous oxide may be indicated for the following:

- Extensive and/or complex procedures (e.g., serial extractions, periodontal surgeries)
- Individuals with physical, cognitive or developmental disabilities
- Ineffective Local Anesthesia
- Management of a severe gag reflex
- Management of fear and anxiety

Nitrous oxide may be contraindicated for the following (this list is not all-inclusive):

- Claustrophobia
- Pregnancy
- Severe underlying medical conditions (e.g., critical illnesses, cardiac disease, pulmonary hypertension)
- Significant personality and behavioral disorders
- Upper respiratory tract infections or other respiratory conditions

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Nitrous oxide is an absolute contraindication for the following:

- Methlenetetrahydropfolate reductase (MTHFR) deficiency
- Pulmonary hypertension
- Severe Chronic Obstructive Pulmonary Disease (COPD)
- Treatment with bleomycin sulfate
- Vitamin B12 deficiency
- Within 3 months vitreoretinal surgery

Intravenous Moderate/Conscious Sedation and Deep Sedation/General Anesthesia (Including Advanced Airway)

Intravenous Moderate/Conscious Sedation and Deep Sedation/General Anesthesia may be indicated for the following:

- Allergy or sensitivity to local anesthetic agents
- Extensive and/or complex procedures (e.g., serial extractions, periodontal surgeries)
- Anxiety and fear when other techniques have proven inadequate
- Behavioral management when other techniques have proven inadequate
- Individuals that are medically compromised or those with special needs
- Management of severe gag reflex if nitrous oxide is ineffective or not indicated
- Pain control when other techniques have proven inadequate

Non-Intravenous Sedation

Non-intravenous sedation may be indicated for the following situations:

- Individuals with physical, cognitive or developmental disabilities
- Mild to moderate apprehension and anxiety

All types of sedation and General Anesthesia may be **contraindicated if there is an increased risk of adverse outcome or complications**. **These include but are not limited to:**

- Abnormalities of the major organ systems
- Previous adverse experience with sedation/analgesia
- Drug allergies
- Current medications and potential drug interactions
- Tobacco, alcohol, or substance use or abuse
- Time and nature of last oral intake

Applicable Codes

The following list(s) of procedure and/or diagnosis codes is provided for reference purposes only and may not be all inclusive. Listing of a code in this guideline does not imply that the service described by the code is a covered or non-covered health service. Benefit coverage for health services is determined by the member specific benefit plan document and applicable laws that may require coverage for a specific service. The inclusion of a code does not imply any right to reimbursement or guarantee claim payment. Other Policies and Guidelines may apply.

CDT Code	Description
D9210	Local anesthesia not in conjunction with operative or surgical procedures
D9211	Regional block anesthesia
D9212	Trigeminal division block anesthesia
D9215	Local anesthesia in conjunction with operative or surgical procedures
D9219	Evaluation for moderate sedation, deep sedation or general anesthesia
D9222	Administration of deep sedation/general anesthesia – first 15 minute increment, or any portion thereof
D9223	Administration of deep sedation/general anesthesia – each subsequent 15 minute increment, or any portion thereof

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CDT Code	Description
D9224	Administration of general anesthesia with advanced airway – first 15 minute increment, or any portion thereof
D9225	Administration of general anesthesia with advanced airway – each subsequent 15 minute increment, or any portion thereof
D9230	Administration of nitrous oxide
D9239	Administration of moderate sedation – intravenous – first 15 minute increment, or any portion thereof
D9243	Administration of moderate sedation – intravenous – each subsequent 15 minute increment, or any portion thereof
D9244	In-office administration of minimal sedation – single drug – enteral
D9245	Administration of moderate sedation – enteral
D9246	Administration of moderate sedation – non-intravenous parenteral – first 15 minute increment, or any portion thereof
D9247	Administration of moderate sedation – non-intravenous parenteral – each subsequent 15 minute increment, or any portion thereof

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Clinical Evidence

Clinical Practice Guidelines

American Dental Association (ADA)

According to the ADA, dentists must comply with their state laws, rules, and/or regulations when providing sedation and anesthesia and follow the educational and training requirements for the level of sedation intended. The ADA maintains clinical guidelines and educational/training requirements for all levels of sedation and includes specific information for the following:

- Patient history and evaluation.
- Personnel and equipment requirements.
- Monitoring and documentation (including consciousness, oxygenation, ventilation, and circulation).
- Recovery and discharge.
- Emergency management.

This guideline can be found at: https://www.ada.org/-/media/project/ada-organization/ada/ada-org/files/resources/research/ada_sedation_use_guidelines.pdf?rev=313932b4f5eb49e491926d4feac00a14&hash=C7C55D7182C639197569D4ED8EDCDDF6. (Accessed June 23, 2025)

American Academy of Pediatric Dentistry (AAPD)

According to the AAPD, the sedation of children is different from the sedation of adults, and the in-office use of Deep Sedation or General Anesthesia may be appropriate on select pediatric dental patients administered in appropriately equipped and staffed facilities. The *Guideline for Monitoring and Management of Pediatric Patients Before, During, and After Sedation for Diagnostic and Therapeutic Procedures* addresses pediatric specific considerations and was developed in conjunction with the American Academy of Pediatrics (AAP). The AAPD guideline highlights the higher risks of adverse outcomes associated with sedation of pediatric patients and emphasizes the steps and actions needed to minimize the risks. This guideline can be found at:
https://www.aapd.org/globalassets/media/policies_guidelines/bp_monitoringsedation.pdf. (Accessed June 23, 2025)

American Society of Anesthesiologists (ASA)

The ASA makes the following recommendations on appropriate patient selection, quality anesthesia care and patient safety in the dental office:

- Pediatric patients and adults with major medical problems (ASA Physical Status III and above) are at higher risk of adverse events than other patients. For these high-risk patients and younger pediatric patients, ASA recommends evaluation by a primary care physician or physician anesthesiologist prior to scheduling a procedure.

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- Prolonged and extensive procedures with longer periods of sedation and anesthesia care are of concern in the office-based setting and qualified anesthesia providers, in consultation with such patients, should consider more suitable facilities for the procedure.
- Personnel with training in advanced resuscitative techniques (e.g., ACLS, PALS) should be immediately available until all patients are discharged home. A designated individual, other than the individual performing the procedure, should be present to monitor the patient throughout procedures performed with sedation. During Deep Sedation and/or General Anesthesia, this individual should have no other responsibilities.
- At a minimum, all facilities should have a reliable source of oxygen, suction, resuscitation equipment, and emergency drugs.
- Ensure there is a protocol for accessing emergency medical services, managing life-threatening complications, and maintaining emergency life support/rescue services.

This guideline can be found at: https://www.asahq.org/standards-and-practice-parameters/statement-on-sedation--anesthesia-administration-in-dental-officebased-settings. (Accessed June 23,2025)

American Academy of Ophthalmology (AAO)

The AAO preferred practice pattern on idiopathic macular hole states that the use of nitrous oxide in a patient with intraocular gas may result in a dangerous rise in intraocular pressure.

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Policy History/Revision Information

Date	Summary of Changes

12/01/2026	**Template Updates**
	• Renamed *Related Dental Policy* to *Related References and Policies*
	• Reordered contents of policy
	  ○ Moved *Description of Services* and *Definitions* towards beginning of policy
	• Added *Prior Authorization* and *Clinical Evidence* section
	• Renamed *Coverage Rationale* to *Clinical Indications*
	  ○ Added Covered Codes
	Definitions
	• Updated definition of:
	  ○ Deep Sedation
	  ○ General Anesthesia
	Applicable Codes
	• Updated list of applicable CDT codes to reflect annual edits:
	  ○ Added D9244, D9245, D9246, and D9247
	  ○ Removed D9248
	  ○ Revised description for D9222, D9223, D9230, D9239, and D9243
	Supporting Information
	• Updated *Description of Services* and *References* sections to reflect the most current information
	• Archived previous policy version CSDEN440OH.A

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Instructions for Use

This Dental Policy provides assistance in interpreting the UnitedHealthcare Community Plan of Ohio dental benefit plans. When deciding coverage, the member specific benefit plan document must be referenced as the terms of the member specific benefit plans may differ. In the event of a conflict, the member specific benefit plan document governs. Before using this policy, please check the member specific benefit plan document and any applicable federal or state mandates. UnitedHealthcare reserves the right to modify its Policies and Guidelines as necessary. This Dental Policy is provided for informational purposes. It does not constitute the practice of medicine or medical advice.

Archived Policy Versions

Effective Date	Guideline Number	Guideline Title
11/01/2025 – 11/30/2026	CSDEN440OH.A	General Anesthesia and Conscious Sedation Services
12/01/2023 – 10/31/2025	CSDEN314OH.A	General Anesthesia and Conscious Sedation Services

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