Statement of Medical Necessity for Anesthesiology Services

Patient Name

Performance of the dental procedures requires MEDICAL PEDIATRIC ANESTHESIOLOGY services for patient cooperation, safety, relief of pain and distress.

- □ Previously attempted moderate sedation and has failed
- □ The child cannot cooperate during the extensive procedures
- □ The child has a developmental or emotional condition
- □ This patient has a complex dental condition, which is likely to result in a medical condition if left untreated

COMMENTS/DESCRIPTION:

Please circle all that apply:

Date of Birth

Description	ICD-10 Diagnosis Code
Caries	K02.9
Mottled Teeth	K00.3
Diseases of Pulp Tissue	K04.0
Traumatic Tooth Loss	K08.419
Disorder of Eruption	коо.9
Abscess	К04.7
ADHD	F90.9
Autism	F84.0
Developmental Delay	F81.9
Cerebral Palsy	G80.9
Epilepsy/Seizures	G40.901
Downs Syndrome	Q90.9
Acute Reaction to Stress	F43.0
Asthma	J45.20
Failed Moderate Sedation	T88.52XA

Signature of patient's dentist

Print name of patient's dentist

Signature of patient's physician

Date

Phone number

Phone number

Summary of legislation: Florida House Bill 3487 / Senate Bill 792

Effective Date October 1, 1998 and applies to all policies issued, or renewed, or contracts entered after such date. Status: Signed by the Governor.

Dental procedures: anesthesia and hospitalization coverage.

For the purposes of this section, dental treatment or surgery is necessary when the patient's dental condition is likely to result in a medical condition if left untreated.

Any individual health-insurance policy in this state that provides coverage for general anesthesia and hospitalization services for medical care shall not preclude the same coverage for necessary dental care provided to a covered person who:

(a) Is younger than 8 and is determined by a licensed dentist and the child's physician (licensed under chapter 458 or chapter 459) to require necessary dental treatment in a hospital or ambulatory surgical center because of a significantly complex dental condition or a developmental disability that makes managing the patient in a dental office ineffective; or

(b) Has one or more medical conditions that would create significant or undue medical risk for the patient in the course of delivery of any necessary dental treatment or surgery if not rendered in a hospital or ambulatory surgical center.

All terms and conditions of the covered person's health-insurance policy shall apply to these services. This section does not require coverage for diagnosing and treating dental disease.

An insurer may require prior authorization for general anesthesia and hospital services required under this section in the same way it is required for hospitalization for other covered services.

This section shall not apply to Medicare supplement, long-term care, disability, limited benefit, accident only or specified disease policies.