# Policy on Third-party Reimbursement of Medical Fees Related to Sedation/General Anesthesia for Delivery of Oral Health Services


## Originating Committee
Dental Care Committee

## Review Council
Council on Clinical Affairs

## Adopted
1989

## Revised
1995, 2000, 2003, 2006

## Reaffirmed
1993


## Purpose
The American Academy of Pediatric Dentistry (**AAPD**), to ensure that all children have access to the full range of oral health delivery systems, advocates that if sedation or general anesthesia and related facility fees are payable benefits of a health care plan, these same benefits shall apply for the delivery of oral health services.

## Methods
This policy is based on a review of the current dental literature related to guidelines for sedation and general anesthesia, as well as issues pertaining to medically-necessary oral health care. A MEDLINE search was conducted using the terms "general anesthesia/sedation costs", "general anesthesia/sedation reimbursement", and "general anesthesia/sedation insurance coverage". Relevant policies and guidelines of the AAPD are included.

## Background
For some infants, children, adolescents, and persons with special health care needs, treatment under sedation/general anesthesia in a hospital, outpatient facility, or dental office or clinic represents the only appropriate method to deliver necessary oral health care.[1,2] The patient's age, dental needs, disabilities, medical conditions, and/or acute situational anxiety may preclude the patient's being treated safely in a traditional outpatient setting.[3-8] These patients may be denied access to oral health care when insurance companies refuse to provide reimbursement for sedation/general anesthesia and related facility services.

Most denials cite the procedure as not medically necessary. This determination appears to be based on arbitrary and inconsistent criteria.[9-14] For instance, medical policies often provide reimbursement for sedation/general anesthesia or facility fees related to myringotomy for a 3-year-old child, but deny these benefits when related to treatment of dental disease and/or infection for the same patient.

American Dental Association (**ADA**) Resolution 1989-546 states that insurance companies should not deny benefits that would otherwise be payable "solely on the basis of the professional degree and licensure of the dentist or physician providing treatment, if that treatment is provided by a legally qualified dentist or physician operating within the scope of his or her training and licensure".[15]

## Policy statement
The AAPD strongly believes that the dentist providing the oral health care for the patient determines the medical necessity of sedation/general anesthesia consistent with accepted guidelines on sedation and general anesthesia.[1,7]

The AAPD encourages third party payors to:

1. recognize that sedation and/or general anesthesia is necessary to deliver compassionate, quality oral health care to some infants, children, adolescents, and persons with special health care needs;
2. include sedation, general anesthesia, and related facility services as benefits of health insurance without discrimination between the "medical" or "dental" nature of the procedure;
3. end arbitrary and unfair refusal of reimbursement for sedation, general anesthesia, and facility costs related to the delivery of oral health care;
4. regularly consult the AAPD and the ADA with respect to the development of benefit plans that best serve the oral health interests of infants, children, adolescents, and patients with special care needs.[16]

## References


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