

Chapter 3

Section 1.1

Anesthesia

Issue Date:

Authority: [32 CFR 199.4\(b\)\(2\)\(vii\)](#), [\(c\)\(2\)\(vii\)](#), [\(c\)\(3\)\(vii\)](#), and [\(g\)\(40\)](#)

Copyright: CPT only © 2006 American Medical Association (or such other date of publication of CPT).

All Rights Reserved.

Revision: C-1, March 10, 2017

1.0 CPT PROCEDURE CODES

00100 - 01999, 99100, 99116, 99135, 99140

2.0 POLICY

2.1 Anesthesia services and supplies are covered.

2.2 See [Section 1.2](#) for conscious sedation.

2.3 See the TRICARE Reimbursement Manual (TRM), [Chapter 1, Section 9](#) for information on reimbursement of anesthesia.

3.0 EXCLUSIONS

3.1 Hypnotherapy.

3.2 A separate benefit is not payable for general anesthesia administered by the attending physician (surgeon or obstetrician) or dentist, or by the surgical, obstetrical or dental assistant. This exclusion does not apply to cases involving administration of local or regional anesthesia such as local anesthesia administered by a surgeon in the surgeon's office, by an obstetrician in a delivery room, or by an orthopedic surgeon in an operating room.

3.3 Acupuncture.

3.4 The use of a Stellate Ganglion Block (SGB) (Current Procedural Terminology (CPT) procedure code 64510) for the treatment of Post-Traumatic Stress Disorder (PTSD) is unproven.

- END -

