Medicare MAC Worksheet

 To simplify the transmission of necessary information for Medicare patients receiving MAC anesthesia for procedures included in MAC policy please submit a copy of this worksheet for each such case. Refer to the MAC policy and the ASA Crosswalk manual for a complete listing of procedures and applicable ICD-10 diagnoses. Common anesthesia codes involved are listed below.

**Patient: Date of Service: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

This patient required MAC anesthesia for this procedure because:

*Please check and circle or complete all that are applicable.*

* This procedure was *painful* or *extensive* or *\_\_\_\_\_\_\_\_\_\_\_\_\_\_* and required deep sedation utilizing *propofol or* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and airway management to preserve adequate respirations.
* This procedure was: ­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This patient has:

* Septicemia
* Severe diabetes *(e.g. blood sugar over 300), Glucose level/Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
* Electrolyte imbalance *Lab result:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
* Morbid Obesity (*>200% ideal body weight) Height:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Weight:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
* Organic Brain Syndrome/dementia with confusion or combative behavior
* Psychosis *Psychiatric diagnosis & therapy:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
* Other psych diagnosis *(Severe anxiety, panic disorder) Dx & Rx\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
* Acute drug or alcohol abuse *(currently intoxicated)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
* Neurological disease D*etails:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
* Cardiac disease *Details:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
* Hypotension/shock *Details:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
* Malignant hypertension *(on meds & systolic>180 or diastolic>110) BP & Meds:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
* Cerebrovascular disease *(acute condition) Dx & Treatment:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
* COPD *Details:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
* Other severe pulmonary disease/Stridor *Details:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
* Hepatic Failure *(e.g. Bilirubin >3) Lab/details:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
* Renal Failure *(acute or end-stage, creatinine>2) Lab/details:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
* Severe allergic reactions *Details:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
* Tracheostomy  *Dx/details:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*
* Other or additional details to support any of above: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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# Common included anesthesia codes: 00160, 00164 – Anesthesia for procedures on nose & sinuses; 00300, 00400 – Integumentary procedures(includes breast, subcutaneous tissue, debridement, etc.); 00532 – Access central venous circulation; 00740, 00810 – GI endoscopy; 00920 – male genitalia; see MAC policy for complete list.

# Use ASA crosswalk manual to link to surgical CPT codes.

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Surgeon signature Date