Anesthesia code calculations

Last modified on 09/28/2026 1:39 pm EDT

We have revised the unit calculation to meet insurance standards. The formula for calculating and billing anesthesia codes is as follows:

Total Units = Base Units + Timed Units + Physical Status Modifier Units

Please ensure that your fee schedule(s) list the correct pricing or anesthesia codes. The new calculation will apply to future appointments only. Any past appointments that contain anesthesia codes will remain the same as when they were created.

Definitions

Base Units—The Centers for Medicare and Medicaid Services (CMS) assigns base units for each anesthesia procedure code. These base units are loaded into DrChrono and will apply automatically based on the anesthesia code entered.

Base Unit Resource

Timed Units - Anesthesia time / 15, rounded

Timed Units Resource

Physical Status Modifier Units -

P1 A normal healthy patient - 0 units
P2 A patient with mild systemic disease - 0 units
P3 A patient with severe systemic disease - 1 unit
P4 A patient with severe systemic disease that is a constant threat to life - 2 units
P5 A moribund patient who is not expected to survive without the operation - 3 units
P6 A declared brain-dead patient whose organs are being removed for donor purposes - 0 units

Physical Status Resource

Utilizing in a patient's appointment

We have added the formula as an information icon in the Billing Detail screen. To see it,

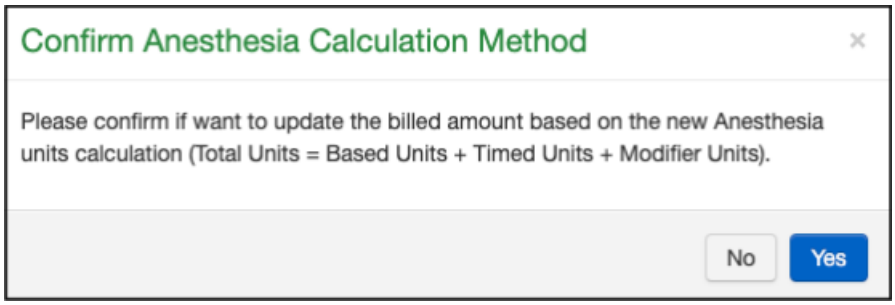
1. Navigate to **Billing > Live Claims Feed**
2. Pull up the patient by name, date of service, or drc claim #.
3. Press the blue date of service to enter the billing details screen.
4. When an anesthesia code is entered, the information icon will appear.



Appointments billed before May 15, 2025

For any appointment billed before May 15, 2025, and the claim is being rebilled, a pop-up will appear asking if you want to keep the anesthesia code pricing according to the prior or new logic.

- If the answer is no, the pricing for the appointment will remain the same.
- If the answer is yes, the pricing on the appointment will be updated using the updated calculation method.



Appointments billed on or after May 15, 2025

For any appointment billed on or after May 15, 2025, the updated calculation for anesthesia codes will be used.