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Requested Modifier	Acceptable	Units	Notes
Pre-op telephone conversations		0	Prior to admission therefore must be provider under the Clinical Services Contract.
Face to face visits with patients prior to the day of surgery		0	
Face to face visits on the day of surgery		0	
Cancellation of case on day of surgery after assessment and management of the relevant issues.		2	Abandoned surgery
Time Units: These are already built into the theatre rate. Please see the guidelines for the non-core ESR01 & ESR02 Codes. There is no special rate for out of hours service.		0	Anaesthetic time commences when the anaesthetist commences exclusive and continuous care of the patient and ceases when the anaesthetist is no longer in professional attendance, that is, when the patient is safely placed under the supervision of other personnel. This will include time spent before and after surgery e.g. time relating to the insertion of blocks and time spent involved in PACU care post-surgery
Age if <1 or >70		1	
ASA 1		0	N/A
ASA 2		0	N/A
ASA 3		2	
ASA 4		3	
Emergency Case		2	
Awake Intubation		2	However accomplished
Positioning NONCORE		2	Any position which is <u>not supine, lithotomy or lateral or spinal procedures</u>
Obesity		0	N/A

BMI- <35			
BMI- 35-40		1	
BMI- >40		2	
Arterial Line, CVL, PA Catheters expected of the anaesthetic and surgery		0	N/A
Arterial line, CVL, PA Catheter insertion as separate procedures not expected of the anaesthetic or surgery		2	
<u>High Dependency Unit (HDU) care with the anaesthetist at home providing cover:</u> Base pricing recognising availability Telephone Calls which require significant management change	 	4 1 unit per call	Or.... 12 units per HDU day
Any face to face visit that results in significant management change		4 units per visit plus time.	

ICU Care where anaesthetist lives in hospital and provides cover		0	This cost is included in the ESR07 cost (ICU)
Ward Care: Visits to the ward or PACU to review the case SIMPLE:		Up to 2 units per visit, with a maximum of 2 visits per day	Non-complex involving epidurals, IV fluids, simple pain management
COMPLEX: NB: The NZSA review group recognises that the very first post-operative visit on the day after surgery can range from a simpler brief meeting to a more complex problem solving and explanation visit. If the visit is less than 15 minutes, then 0 extra cost could be applied. If the visit is longer than 15 minutes, then additional modifiers described above could be applied.		Up to 2 units (plus up to 2 more units with justification)	Complex visits with significant documented management issues
Continuous Regional Block Plexus/Nerve Catheter Care (which stay in the patient overnight or for several days)		Up to 3	Evidence of anaesthetic invoice is required to approve these payment
Prolonged PACU care		Time units or refer to 'Ward Care' section	On occasion PACU care will be prolonged. The time units should reflect the PACU care but additional documentation should be provided if a PACU time greater than 15 minutes is being claimed for.