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Casualty Solutions Group (CSG)

This communication provides Mitchell's comments on rules proposed by the Industrial Commission of Arizona on the 2024 Arizona Physicians and Pharmaceutical Fee Schedule proposed/informal draft.

Comment 1:

Modifier 47 in the surgical section has been amended: "47 Anesthesia by Surgeon: The value shall be fifty percent (50%) of the Fee Schedule."

Traditionally, this modifier is used to represent the anesthesia service and is limited to once per encounter and priced as the underlying base anesthesia service with no time allowed.

Is this amendment indicating that the provider shall bill this as a separate line item to the surgery performed and to price this anesthesia service at 50% of the surgical CPT code's value from the fee schedule?

Can clarification be included to indicate if there are limits to this modifier to only be billed/allowed once per surgical encounter vs for every surgical procedure performed?

Comment 2:

This second comment is not specifically related to the proposed fee schedule, but a question on whether or not in the future the state plans on adopting a hospital and facility fee schedule?