

Coding Policy

Modifier -47: Anesthesia by Surgeon

CODING POLICY NUMBER: 51

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SCOPE: Providence Health Plan, Providence Health Assurance, Providence Plan Partners, and Ayin Health Solutions as applicable (referred to individually as “Company” and collectively as “Companies”). **The full Company portfolio of current coding policies is available online and can be [accessed here](#).**

POLICY APPLICATION

- Providence Health Plan Participating Providers
- Non-Participating Practitioners
- Commercial
- Medicaid/Oregon Health Plan
- Medicare

POLICY STATEMENT

I. Company will deny codes billed with modifier 47 based on the following rationale:

- A. Anesthesia administered by the performing physician is considered included in the payment for the procedure.
- B. Medicare does not recognize the use of the modifier.
- C. Company policy does not recognize CPT policy which states: *“Regional or general anesthesia provided by the surgeon may be reported by adding the modifier 47 to the basic service.”*

PROCEDURE

Codes billed with modifier 47 will be denied.

REFERENCES

1. CMS/Medicare Administrative Rules and Regulations
2. Current Procedural Terminology (CPT)
3. Providence Health Plan Coding Edits

POLICY REVISION HISTORY

Date	Revision Summary
1/2003	Original policy effective date.
1/2023	Annual review. Converted to new template 5/2023.
1/2024	Annual review. No changes to policy.
1/2025	Annual review. No changes to policy.