

**U.S. DEPARTMENT OF LABOR, OFFICE OF WORKERS' COMPENSATION PROGRAMS**  
**OWCP MEDICAL FEE SCHEDULE -- Effective February 27, 2017**  
**Anesthesia Modifiers**

File: Effective\_February\_27\_2017\_anesthesia\_tables\_with\_base\_units.xls

Modifiers are two-character indicators used to modify payment of a procedure code or otherwise identify the detail on a claim. Every anesthesia procedure billed to OWCP **must** include one of the following anesthesia modifiers: AA, QY, QK, AD, QX or QZ.

**Anesthesiologist**

Modifier	Description	Multiple
AA	Anesthesia services personally performed by the anesthesiologist	100%
QY	Medical direction of one CRNA by an anesthesiologist	50%
QK	Medical direction of two, three or four concurrent anesthesia procedures	50%
AD	Supervision, more than four procedures	**

\*\* Payment to the anesthesiologist will be based on three base units per procedure when the anesthesiologist is involved in furnishing more than four procedures concurrently or is performing other services while directing the concurrent procedure. An additional time unit can be recognized if the physician can document he was present at induction.

**CRNA**

Modifier	Description	Multiple
QX	Anesthesia, CRNA medically directed	50%
QZ	Anesthesia, CRNA not medically directed	100%

**Informational (no additional payment for informational modifiers)**

Modifier	Description
QS	Monitored anesthesia care (MAC) services (can be billed by CRNA or physician)
G8	Monitored Anesthesia Care (MAC) for deep complex, complicated or markedly invasive surgical procedure
G9	Monitored Anesthesia Care (MAC) for patient who has history of severe cardiopulmonary condition
P1	A normal healthy patient
P2	A patient with mild systemic disease
P3	A patient with severe systemic disease
P4	A patient with server systemic disease that is a constant threat to life
P5	A moribund patient who is not expected to survive without the operation
P6	A declared brain-dead patient whose organs are being removed for donor purposes