Coding with Modifiers

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DISCLOSURE OF RELEVANT RELATIONSHIPS WITH INDUSTRY

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none

What are modifiers?

- Two digit codes
- Indicate that a service/procedure has been altered
- May be informational OR payment related

-25 modifier

- “Significant separately identifiable evaluation and management (E/M) service by the same clinician on the day of a procedure.”

Question 1

- An established patient presents complaining of an itchy rash on his hands, and a new bump on his leg. Patient is counseled on hand dermatitis, prescribed halobetasol cream, and the leg lesion is biopsied.

• What is the correct coding?
  1. 11100 only
  2. 9921x, 11100
  3. 9921x-25, 11100
  4. 9921x only
Question 1

- An established patient presents complaining of an itchy rash on his hands, and a new bump on his leg. Patient is counseled on hand dermatitis, prescribed halobetasol cream, and the leg lesion is biopsied.
- What is the correct coding?
  1. 11100 only
  2. 9921x, 11100
  3. 9921x-25, 11100
  4. 9921x only

Question 2

- An established patient presents complaining of a new bump on his nose. It is bleeding. PE notes a 3mm pearly crusted papule. You biopsy the lesion.
- What is the correct coding?
  1. 11100 only
  2. 9921x, 11100
  3. 9921x-25, 11100
  4. 9921x only

Question 3

- An established patient presents complaining of a new scaly lesion on her nose. PE notes a 6mm thick, erythematous, scaly papule on her nose. It also notes numerous other 0.2-0.4cm erythematous scaly papules on her cheeks and forehead.
- You decide to destroy the lesion on her nose with LN2, and to prescribe ingenol mebutate to treat the AKs of her face.
- What is the correct coding?
  1. 17000 only
  2. 9921x, 17000
  3. 9921x-25, 17000
  4. 9921x only
Question 3

- An established patient presents complaining of a new scaly lesion on her nose. PE notes a 6mm thick, erythematous, scaly papule on her nose. It also notes numerous other 0.2-0.4 cm erythematous scaly papules on her cheeks and forehead.
- You decide to destroy the lesion on her nose with LN2 and to prescribe ingenol mebutate to treat the AKs of her face.
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  1. 17000 only
  2. 9921x, 17000
  3. 9921x-25, 17000
  4. 9921x only

Proper use of -25 modifier

Correct Usage:
- Indicates that an E/M service is above and beyond the normal, uncomplicated preoperative and postoperative care usually associated with a surgical procedure.
- Visit should be able to stand alone as billable service.
- Second diagnosis is NOT required
- ...but it sure does make it easier!

INCORRECT Usage:
- Should NOT be used to bill an E/M service for decision to perform minor surgery (0-10 day global codes.....at the moment)

Proper use of -25 modifier

So REMOVE all the work – evaluation, diagnosing, examining, deciding to perform, performing the procedure, post-op instruction/meds

AND THEN, IF THE REMAINING documentation from that date of service stands alone as a billable E/M visit—
- You can then use modifier -25

-24 modifier

“Unrelated evaluation and management (E/M) service by the same physician during a postoperative period.”

Medicare regulations state: “Physicians in the same group practice who are in the SAME specialty, must bill and be paid as though they were a single physician.”

Question 4

- You excise an SCC on the patient’s arm, and 3 days later they present with an erythematous tender area surrounding the wound. They are concerned it is a wound infection.
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- What is the correct coding?
  - 1. 9921x
  - 2. 9921x-24
  - 3. 99024

99024

- Postoperative follow-up visit, normally included in the surgical package, to indicate that an evaluation and management service was performed during a postoperative period for a reason(s) related to the original procedure.

99024 States

- Florida
- Kentucky
- Louisiana
- Nevada
- New Jersey
- North Dakota
- Ohio
- Oregon
- Rhode Island

Question 5

- You excise a BCC on the patient’s face, and 3 days later they present with a new rash on their legs.
Question 5

- You excise a BCC on the patient’s face, and 3 days later they present with a new rash on their legs.
- What is the correct coding?
  - 1. 9921x
  - 2. 9921x-24
  - 3. 99024

Proper use of -24 modifier

Correct Usage:
- Indicates that an UNRELATED E/M service took place beginning the day after the procedure, when performed by the same physician, during the 10 or 90 day global period.
- DO NOT USE when patient comes in with a surgical complication. That is considered bundled into the global period.

-59 modifier

- Distinct procedural service – identifies procedures/services not normally reported together, but appropriately billable under the circumstances
- Indicates two separate procedures performed on the same day by the same physician
- Attach -59 to the secondary, additional, or lesser procedure of combinations listed in the National Correct Coding Initiative (NCCI) edits.

-59 Modifier

- Most commonly used modifier
- CMS suspects abuse
- They developed 4 HCPCS codes to replace modifier 59

New Modifiers

- XE: Separate Encounter
- XS: performed on a separate organ/structure
- XP: performed by a different practitioner
- XU: Unusual non-overlapping service
Caveats

- Both -59 and the 4 new modifiers will initially be accepted
- Individual MACs can determine that they will only accept the 4 new modifiers

59 Rules

- 17004 never gets -59
- 17110 doesn’t get -59 unless 17004 is billed. If no 17004, then -59 all other surgeries
- If no 17004 and no 17110, then 17000 is the one not modified with -59

Question 6

- Established patient presents to you with an itchy rash on their abdomen, an AK on their nose, and a bleeding nodule on their R dorsal hand.
- You prescribe triamcinolone cream for a diagnosis of dermatitis. You destroy the AK with LN2, and you biopsy the lesion on the hand.

Question 7

- Established patient presents to you with multiple AKs on their face, chest, and arms. They also have a wart on their L 3rd digit that is frequently traumatized, and is bleeding:
- You destroy 16 AKs with LN2, and you destroy the wart with an ED&C
Question 7

- Established patient presents to you with multiple AKs on their face, chest, and arms. They also have a wart on their L 3rd digit that is frequently traumatized, and is bleeding.
- You destroy 16 AKs with LN2, and you destroy the wart with an ED&C
- What is the correct coding?
  1. 17004-59, 17110
  2. 17004, 17110-59

-79 modifier

- “Unrelated procedure performed during the post-operative period of the first procedure.”
- DO NOT USE if the procedure performed today IS related to the prior procedure

Question 8

- You destroy an AK on the patient’s nose, and 7 days later they complain of a crusted papule on their R leg. You biopsy the lesion on their R leg.
- What is the correct coding?
  1. 11100
  2. 11100-79
  3. 99024

Question 8

- You destroy an AK on the patient’s nose, and 7 days later they complain of a crusted papule on their R leg. You biopsy the lesion on their R leg.
- What is the correct coding?
  1. 11100
  2. 11100-79
  3. 99024
Question 9

- You destroy 5 AKs on the patient’s face with LN2. They come back 9 days later and complain that it worked for all but one of the lesions. You freeze the one lesion.

- What is the correct coding?
  - 1. 17000
  - 2. 17000-79
  - 3. 99024

Hospice Patients

- If a service is unrelated to the diagnosis for which they are in the hospice program—
  - -GW modifier should be attached to every service performed.
  - 99213-GW-25
  - 11100-GW

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