

Reimbursement Policy Modifier Reference Guide

This document is a reference guide to provide information regarding modifiers related to Medica reimbursement policies. The use of modifiers is an important component of billing health care services. Under certain circumstances, procedure codes can be modified to provide a more accurate representation of the service rendered.

Refer to the reimbursement policies listed for each modifier to obtain additional information.

Note: The list below represents many modifiers that are addressed in Medica reimbursement policies. It is not an all-inclusive list of CPT and HCPCS modifiers.

Modifier	Description	Refer to Reimbursement Policy
22	Increased procedural service	Increased Procedural Service, Obstetrical
23	Unusual anesthesia	Anesthesia
24	Unrelated evaluation and management (E/M) service by the same physician or other qualified health care professional during a postoperative period	Anesthesia, Global Days
25	Significant, separately identifiable E/M by the same physician or other qualified health care professional on the same day of the procedure or other service	Anesthesia, CCI Editing, Global Days, Injection and Infusion Services, Obstetrical, Preventive Medicine and Screening, Rebundling, Same Day Same Service
26	Professional component	Professional and Technical Components
27	Multiple outpatient hospital E/M encounters on the same date	Services and Modifiers Not Reimbursable to Health Care Professionals
50	Bilateral procedure	Bilateral Procedures, Co-Surgeon/Team Surgeon, One or More Sessions
51	Multiple procedure	Multiple Procedure Reduction, Obstetrical
52	Reduced services	Bilateral Procedures, One or More Sessions, Modifier Reduction Policy
53	Discontinued procedure	Discontinued Procedure, Once in a Lifetime Procedures, One or More Sessions
54	Surgical care only	One or More Sessions, Split Surgical Package
55	Postoperative management only	One or More Sessions, Once in a Lifetime Procedures, Split Surgical Package
56	Preoperative management only	One or More Sessions, Once in a Lifetime Procedures, Split Surgical Package
57	Decision for surgery	Global Days
58	Staged or related procedure or service by the same physician or other qualified health care professional during the postoperative period	Global Days, Once in a Lifetime Procedures, Rebundling
59	Distinct procedural service	Anesthesia, CCI Editing, Multiple Procedure Payment Reduction for Diagnostic Imaging, Laboratory Services, Maximum Units of Service, Obstetrical, Rebundling

62	Two surgeons	Co-Surgeon/Team Surgeon
63	Procedure performed on infants less than 4kg	Increased Procedural Services
66	Surgical team	Co-Surgeon/Team Surgeon
73	Discontinued outpatient hospital/ambulatory surgery center procedure prior to the administration of anesthesia	Services and Modifiers Not Reimbursable to Health Care Professionals
74	Discontinued outpatient hospital/ambulatory surgery center procedure after administration of anesthesia	Services and Modifiers Not Reimbursable to Health Care Professionals
76	Repeat procedure or service by the same physician or other qualified health care professional	Laboratory Services , Maximum Units of Service
77	Repeat procedure or service by another physician or other qualified health care professional	Laboratory Services
78	Unplanned return to the operating/procedure room by the same physician or other qualified health care professional following initial procedure for a related procedure during the postoperative period	Anesthesia , Global Days , Multiple Procedure Reduction , Rebundling
79	Unrelated procedure or service by the same physician or other qualified health care professional during the postoperative period	Global Days , One or More Sessions , Rebundling
80	Assistant surgeon	Assistant Surgeon
81	Minimum assistant surgeon	Assistant Surgeon
82	Assistant surgeon (when qualified resident surgeon is not available)	Assistant Surgeon
90	Reference (outside) laboratory	Laboratory Services
91	Repeat clinical diagnostic laboratory test	Laboratory Services , Maximum Units of Service , Rebundling
92	Alternative laboratory platform testing	Laboratory Services
93	Synchronous telemedicine service rendered via telephone or other real-time interactive audio-only telecommunications system	Telemedicine (Emergency) excluding Minnesota Health Care Program Members , Telemedicine (Emergency) for Minnesota Health Care Program Members
95	Synchronous telemedicine services rendered via a real-time interactive audio-video telecommunications system	Telemedicine (Emergency) excluding Minnesota Health Care Program Members , Telemedicine (Emergency) for Minnesota Health Care Program Members
AA	Anesthesia services performed personally by an anesthesiologist	Anesthesia

AD	Medical supervision by a physician: more than four concurrent anesthesia procedures	Anesthesia
AS	Physician assistant, Nurse practitioner or Clinical nurse specialist service for assistant at surgery	Assistant Surgeon
CP	Adjunctive service related to a procedure assigned to a comprehensive ambulatory payment classification (C-APC) procedure, but reported on a different claim	Service and Modifiers Not Reimbursable to Health Care Professionals
CT	Computed tomography services furnished using equipment that does not meet each of the attributes of the National Electrical Manufacturers Association (NEMA) XR-29-2013 standard	Modifier Reduction Policy
E1 – E4	Anatomic modifiers associated with the eyelid	CCI Editing , Rebundling
FA, F1 – F9	Anatomic modifiers associated with the fingers	CCI Editing , Rebundling
FQ	The service was furnished using audio-only communication technology	Telemedicine (Emergency) excluding Minnesota Health Care Program Members
FX	X-Ray taken using film	Modifier Reduction Policy
FY	X-Ray taken using computed radiography technology/cassette-based imaging	Modifier Reduction Policy
GQ	Via asynchronous telecommunications system	Telemedicine (Emergency) excluding Minnesota Health Care Program Members , Telemedicine (Emergency) for Minnesota Health Care Program Members
GT	Via interactive audio-video telecommunications system	Telemedicine (Emergency) excluding Minnesota Health Care Program Members , Telemedicine (Emergency) for Minnesota Health Care Program Members
JW	Drug amount discarded/not administered to any patient	Discarded Drugs and Biologicals
LC	Left circumflex coronary artery	CCI Editing , Rebundling
LD	Left anterior descending coronary artery	CCI Editing , Rebundling
LM	Left main coronary artery	CCI Editing , Rebundling
LT	Left side	Bilateral Procedures , CCI Editing , One or More Sessions , Rebundling
P1	A normal, healthy patient	Anesthesia
P2	A patient with a mild systemic disease	Anesthesia
P3	A patient with a severe systemic disease	Anesthesia
P4	A patient with a severe systemic disease that is a constant threat to life	Anesthesia
P5	A moribund patient who is not expected to survive without the operation	Anesthesia

P6	A declared brain-dead patient whose organs are being removed for donor purposes	Anesthesia
QK	Medical direction of two, three or four concurrent anesthesia procedures involving qualified individuals	Anesthesia
QX	Qualified non-physician anesthetist with medical direction by a physician	Anesthesia
QY	Medical direction of one qualified non-physician anesthetist by an anesthesiologist	Anesthesia
QZ	CRNA service, without medical direction by a physician	Anesthesia
RC	Right coronary artery	CCI Editing , Rebundling
RI	Ramus intermedius coronary artery	CCI Editing , Rebundling
RT	Right side	Bilateral Procedures , CCI Editing , One or More Sessions , Rebundling
SE	Two definitions: <ul style="list-style-type: none"> State and/or federally funded programs/services Ambulance transportation from scene of accident or acute event to residential, domiciliary or custodial facility (nursing home, not skilled nursing facility) 	Services and Modifiers Not Reimbursable to Health Care Professionals Ambulance
SL	State supplied vaccine	Services and Modifiers Not Reimbursable to Health Care Professionals
TA, T1 – T9	Anatomic modifiers associated with the toes	CCI Editing , Rebundling
TC	Technical component	Professional and Technical Components
XE	Separate encounter: A service that is distinct because it occurred during a separate encounter	Anesthesia , CCI Editing , Laboratory Services , Maximum Units of Service , Multiple Procedure Payment Reduction for Diagnostic Imaging , Obstetrical , Rebundling
XP	Separate practitioner: A service that is distinct because it was performed by a different practitioner	Anesthesia , CCI Editing , Laboratory Services , Maximum Units of Service , Obstetrical , Rebundling
XS	Separate structure: A service that is distinct because it was performed on a separate organ/structure	Anesthesia , CCI Editing , Laboratory Services , Maximum Units of Service , Obstetrical , Rebundling
XU	Unusual non-overlapping service: The use of a service that is distinct because it does not overlap usual components of the main service	Anesthesia , CCI Editing , Laboratory Services , Maximum Units of Service , Obstetrical , Rebundling



Revision Updates:	
05/30/2023	Links and Template Updated. Modifiers FX, FY and CT Added
01/25/2022	Added 93 and FQ Modifiers

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