



<http://www.wpsmedicare.com>

### Modifier 25 Quick Tip Script

Welcome to the WPS Medicare discussion of Modifier 25.

Our second slide gives you the pathway to find a Fact Sheet on Modifier 25. We list our Website address (<http://www.wpsmedicare.com>) for you. Once on the Website, under Part B on the right side of the screen, choose "Illinois, Michigan, Minnesota, Wisconsin." You will then need to accept the Current Procedural Terminology (CPT) licensure agreement. On the next screen, select "Modifiers" under Education on the lower right side of the screen. Scroll down and select "25 Modifier" to view the fact sheet. The fact sheet provides information on the definition of the modifier and the correct uses.

This modifier causes a large number of telephone calls into our office and requests for Redeterminations. Understanding the accurate use of the modifier allows you to append the modifier appropriately on the original claim and decrease the number of denied claims requiring further action by your office.

Slide 3 has a screen print of the Fact Sheet. So let us talk about this modifier.

Modifier 25 is a "Significant, Separately identifiable Evaluation and Management (E/M) service by the same physician on the day of a procedure." The modifier is only valid when used in a very specific set of circumstances. Medicare considers all E/M services provided on the day of a procedure to be part of the surgery and as such, Medicare does not make separate payment. The only exception is when the E&M documentation supports a "Significant and separately identifiable" service. Significant means there is a great amount of additional work, above and beyond what the physician would normally provide prior to the procedure. The term "separately identifiable" means the documentation shows the separate portion of the E/M service.

- This modifier does not apply to an E/M provided by someone other than the surgeon. Please remember, Medicare views physicians within the same group and with the same specialty as the same person.
- This modifier does not apply when the documentation shows the amount of work performed by the physician to be consistent with that normally performed at the same time as the procedure.
- Do not add a modifier unless it is appropriate based on Medicare guidelines.

The following statements are false:

1. I can always use this modifier for a new patient.
2. I can always use this modifier when I did not plan the procedure.
3. I can always use this modifier when the diagnoses are different.
4. I can never use the modifier when the diagnoses are the same.

The first thing to keep in mind is documentation must support the use of this modifier. You do not want edits built into your billing system that automatically add this modifier. This is inappropriate. You do want to have edits in your system to cause this type of claim to stop so someone can evaluate the relationship to the surgical procedure. You



<http://www.wpsmedicare.com>

can then determine whether the service meets an exception, meaning you can bill the E/M separately or it does not meet an exception and you cannot bill separately.

Our next slide shows the CMS, or Center for Medicare & Medicaid Services (CMS), Website address and instructions on how to access the Physician Fee Schedule Relative Value file. You may also hear this referred to as the Medical Fee Schedule Data Base (MPFSDB). I suggest placing a bookmark on this file. Once on this file, choose the year and then your procedure code. The column "Global Days" shows whether the service is a procedure. There are multiple designations in the "Global Days" column. They are as follows:

- 000 – Service provided on the date of the procedure are included in the reimbursement of the procedure
- 010 – Services provided on the date of the procedure and 10 days after are included in the reimbursement of the procedure
- 090 – Services provided the day before, the day of and 90 days after the procedure are included in the reimbursement of the procedure
- XXX – Global surgery concept does not apply
- YYY – Contractor sets the global period
- ZZZ – This procedure is a component of another code. Look to the other procedure code for global days

Please take some time to ensure your office staff understands the use of this modifier and your billing software allows you to submit this modifier appropriately. When services meets an exception allowing the use of the modifier, the correct submission of the claim allows your office to receive payment faster and prevents having to look at and evaluate the service again later.

Thank you for your time.