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Modifier AI Fact Sheet

Definition:

- Principal Physician of Record

Appropriate Usage:

- To identify the admitting or attending physician who oversees the patient's care while in an inpatient or nursing facility setting
- Appended to the initial inpatient hospital visit procedure code
- Appended to the initial nursing facility procedure code
- Valid for services January 1, 2010 and after

Inappropriate Usage:

- Appended to procedure codes other than the initial inpatient visit or initial nursing facility care services
- Appended by physicians other than the attending or admitting physician who oversees the patient's care
- Appended to services dated December 31, 2009 and before

Additional Information

Note: Medicare will allow services when a provider uses this modifier incorrectly on an office or other outpatient service. Medicare will allow services when someone other than the principal physician of record uses this modifier. Medicare can allow services provided by a physician called in to see the patient even though the principal physician of record does not append this modifier to his/her claim or he/she has not yet submitted the claim to Medicare.

Documentation:

The patient's medical record indicates the physician overseeing the patient's care in an inpatient or nursing facility setting.

Unassigned Claim:

The use of the modifier does not change the processing of unassigned claims.

Example: The principal physician of record provided an initial inpatient visit.

17. NAME OF REFERRING PROVIDER OR OTHER SOURCE										17a.																			
										17b. NPI																			
18. HOSPITALIZATION DATES RELATED TO CURRENT SERVICES										FROM		MM	DD	YY	TO		MM	DD	YY										
19. RESERVED FOR LOCAL USE										20. OUTSIDE LAB?		\$ CHARGES																	
										<input type="checkbox"/> YES <input type="checkbox"/> NO																			
21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY (Relate Items 1, 2, 3 or 4 to Item 24E by Line)										22. MEDICAID RESUBMISSION CODE		ORIGINAL REF. NO.																	
1. _____										3. _____																			
2. _____										4. _____																			
23. PRIOR AUTHORIZATION NUMBER																													
24. A. DATE(S) OF SERVICE										B. PLACE OF SERVICE		C. EMG		D. PROCEDURE, SUPPLY, OR SUPPLIES (Explain Unusual Circumstances)				E. DIAGNOSIS POINTER		F. \$ CHARGES		G. DAYS OR UNITS		H. EPSDT (Family Plan)		I. ID. QUAL.		J. RENDERING PROVIDER ID. #	
From MM DD YY To MM DD YY										SERVICE		EMG		CPT/HCPCS				MODIFIER											
1																													
2																													
3																													

This is an **informational** only modifier. The modifier will not make any changes in processing or amounts payable. Therefore, append any payment modifiers before the AI modifier.