

Policy	REIMB-030
Effective Date	09/01/2024
Reviewed/Revised Date	09/01/2024
Next Review Date	09/01/2026
Origination Date	01/01/2024
Originated Department	Medical Management

Modifier -24

Audience
Medical Management, Claims

Purpose
<p>Medical policies provide general support for applying Mountain Health Co-Op member policy document coverage decisions, and the member-specific benefit plan document must be referenced. The terms of the member-specific Policy document may differ from the standard benefit plan based on this medical policy. If there is a conflict between a member-specific policy document and the Mountain Health Co-Op medical policy, the document supersedes this policy. Any person(s) applying this medical policy must identify member eligibility, the member-specific policy document, and related policies or guidelines before applying this medical policy, including the existence of any state or federal guidance. Mountain Health Co-Op medical policies are designed for informational purposes only and are not an authorization, explanation of benefits, or contract. Receipt of benefits is subject to the satisfaction of all terms and conditions of the member-specific policy document coverage. Mountain Health Co-Op reserves the sole discretionary right to modify all policies and guidelines at any time.</p>

Definition
<p>Centers for Medicare & Medicaid Services (CMS) states that modifier -24 is to be appended to an unrelated, appropriate level, evaluation and management (E&M) service performed by the same physician during a postoperative period to indicate that the E&M service is unrelated to the procedure. Mountain Health Co-Op follows the CMS guidelines for the use of modifier -24.</p>

Policy/Procedure
<p>Mountain Health Co-Op may separately reimburse an E&M service provided during a global period of an endoscopy or major/minor surgical procedure that is performed by the same provider when ALL the following criteria are met:</p> <p>A. The E&M service is unrelated to the surgery;</p>

- B. Modifier -24 is appended to the E&M code;
- C. Sufficient documentation establishes the E&M service is unrelated to the surgery (e.g., a diagnosis code that clearly indicates the reason is unrelated to the surgery);

Mountain Health Co-Op does NOT reimburse an E&M service submitted with modifier -24 that is intended to be used for the medical management of a patient following an endoscopy or major/minor surgical procedure by the same surgeon or physician who billed for postoperative care only with modifier -55.

Clinical Rationale

Per CMS guidelines “Modifier “-24”: Reports an unrelated evaluation and management service by same physician during a postoperative period. The physician may need to indicate that an evaluation and management service was performed during the postoperative period of an unrelated procedure. This circumstance is reported by adding the modifier “-24” to the appropriate level of evaluation and management service. Services submitted with the “-24” modifier must be sufficiently documented to establish that the visit was unrelated to the surgery. A diagnosis code that clearly indicates that the reason for the encounter was unrelated to the surgery is acceptable documentation. A physician who is responsible for postoperative care and has reported and been paid using modifier “-55” also uses modifier “-24” to report any unrelated visits.”

Applicable Coding

Modifiers

Mod -24 Unrelated Evaluation and Management Service by the Same Physician or Other Qualified Health Care Professional during a Postoperative Period

References

1. Center for Medicare and Medicaid Services (CMS) (2022). CMS Manual System; Revision #R11828CP (Feb 2, 2023); Pub 100-04; Chapter 12; Sections 40.1-40.4. Accessed: April 14, 2023. Available at: <https://www.cms.gov/files/document/r11287cp.pdf>
2. Center for Medicare and Medicaid Services (CMS). Medicare Claims Processing Manual. Chapter 12-Physicians/Nonphysician Practitioners. Accessed: April 14, 2023. Available at: <https://go.cms.gov/manual-physicians-nonphysician-practitioners>
3. Current Procedural Terminology (CPT®) Professional Edition (Chicago, IL: American Medical Association: ©2023)
4. Optum360® EncoderPro.com for Payers Professional. (2023). Accessed April 14, 2023. Available at: <https://www.encoderprofp.com>

Vendors

- Health Plan Services (HPS)

Review/Revision/Approval History	
Date	Description
01/01/2024	New Policy
01/01/2025	Reviewed, NC

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