

The following descriptive information tells about modifiers that add specificity to CPT and HCPCS codes. You will find additional information in the 2015 Current Procedural Terminology (CPT) Code Book.

Modifier	Description	Modifier Use
22	Unusual procedure or service	The -22 modifier can be used to indicate that the work is substantially greater than typically required. Modifier “-22” should not be used frequently because the payer could make the determination that the procedure reflects typical service delivery. For claims with the “- 22” modifier a description of the need for extended services should accompany the claim.
25	Identifiable evaluation and management code	The -25 modifier is a significant, separately identifiable Evaluation and Management Service by the qualified provider on the same day of the procedure or other service. The qualified provider may need to indicate that on the day a procedure or service identified by CPT code was performed, the patient's condition required a significant, separately identifiable E/M service above and beyond the other service provided or beyond the usual preoperative and postoperative care associated with the procedure that was performed. This charge must be substantiated by documentation that satisfies the relevant criteria for the service to be reported.
52	Reduced services	The -52 modifier defines a shorter than normal service.
59	Distinct procedural service	The- 59 modifier is used to establish one procedure as distinct from another procedure billed on the same day. The XE, XS, XP, and XU modifiers should be used in in place of this modifier beginning January 2015. The use of X modifiers is a payer-by-payer option. Check with each payer to determine whether you should use the -59 or the -X modifier series.
GN	Medicare speech therapy designation	Part B Medicare services require the GN designation for services provided for speech-language pathology or dysphagia service. The requirement applies to physician offices as well as facilities and private practices.
GP	Medicare physical therapy designation	Part B Medicare services require the GP designation for provided physical therapy services. The requirement applies to physician offices as well as facilities and private practices.
GO	Medicare occupational therapy designation	Part B Medicare services require the GO designation for services provided by an occupational therapist. The requirement applies to physician offices as well as facilities and private practices.

Modifier descriptions, continued.

KX	Therapy cap extension	The exceptions process allows beneficiaries to access medically necessary <b>Medicare Part B outpatient therapy services</b> above the therapy cap. When the Medicare Part B beneficiary qualifies for a therapy cap exception because of the demonstrated medical need to provide services above the therapy cap, the KX modifier is required with the CPT/HCPCS code on the claim form. Please review the Medicare Claims Processing Manual, Chapter 5, Sections 10.2-10.5 [PDF] for a complete description of Medicare's policy for outpatient therapy caps, including the exceptions process and use of the KX modifier. The KX modifier can be included with claims prior to reaching the cap because the patient's current accrued claims amount cannot be known for certain due to claims submitted by other providers. However, it should not routinely be used with claims significantly before reaching the cap because the KX modifier indicates services qualify for the exception. Overuse may result in additional reviews by contractors. By appending the KX modifier, you are attesting that the services billed are 1) reasonable and necessary services, and that services require the skills of the qualified provider, 2) are justified by appropriate documentation, and 3) qualify for an exception.
XE	Separate encounter	The XE modifier represents a service that is performed under the same billing provider NPI on the same date of service, but is distinct because it is a separate encounter for the patient. X modifiers replace the -59 modifier.
XS	Separate structure	The XS modifier represents a service that is performed under the same billing provider NPI on the same date of service, but on a different structure or organ. X modifiers replace the -59 modifier.
XP	Separate practitioner	The XP modifier represents a service that is performed under the same billing provider NPI on the same date of service, but is distinct because the service is performed by a different individual provider. X modifiers replace the -59 modifier.
XU	Unusual non-overlapping service	The XU modifier represents a service that is performed under the same billing provider NPI on the same date of service, but the procedure does not overlap the usual components of the main service performed. X modifiers replace the -59 modifier.

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