


ISSUE DATE September 12, 2014	EFFECTIVE DATE September 15, 2014	NUMBER 99-14-08
SUBJECT Implementation of National Correct Coding Initiative Related Modifiers		BY  Vincent D. Gordon, Deputy Secretary Office of Medical Assistance Programs

PURPOSE:

The purpose of this bulletin is to inform providers the Department of Public Welfare (Department) will begin accepting National Correct Coding Initiative (NCCI) Procedure-to-Procedure (PTP)-associated modifiers that are not currently recognized by the Medical Assistance (MA) Program. These changes must be implemented to support the Centers for Medicare and Medicaid Services (CMS) NCCI program. These changes are effective for dates of service on and after September 15, 2014.

SCOPE:

This bulletin applies to MA enrolled providers who render services to beneficiaries in the MA fee-for-service (FFS) delivery system and submit professional and outpatient claims as indicated in Attachment A of this bulletin. This bulletin does not apply to providers who render services to MA beneficiaries in the HealthChoices managed care delivery system. Providers rendering services to beneficiaries in the MA managed care delivery system should address any coding or billing questions to the appropriate managed care organization.

BACKGROUND:

The Patient Protection and Affordable Care Act (ACA) of 2010 mandated the implementation of the NCCI. CMS issued State Medicaid Director Letter #10-017 on September 1, 2010, identifying two types of NCCI edits to be applied to services performed by the same provider for the same beneficiary on the same date of service, regardless of whether services are reported on the same claim or on different claims. The two types of edits are:

- (1) NCCI PTP edits - These edits define pairs of Healthcare Common Procedure Coding System (HCPCS) / Current Procedural Terminology (CPT) codes that should not be reported together.

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

The appropriate toll free number for your provider type

Visit the Office of Medical Assistance Programs Web site at
<http://www.dpw.state.pa.us/provider/healthcaremedicalassistance/index.htm>

- (2) Medically Unlikely Edits (MUE) units-of-service edits - These edits define for each HCPCS / CPT code the number of units beyond which the reported number of units is unlikely to be correct.

The Department implemented NCCI program edits in two phases.

The first phase was implemented on December 1, 2011, and is addressed in MA Bulletin 99-11-10 titled "[Announcing the Federally Mandated Implementation of the National Correct Coding Initiative \(NCCI\) in the Pennsylvania Department of Public Welfare's Medical Assistance Program](#)". This phase included NCCI Procedure-to-Procedure (PTP) code pairs that are subject to Incidental and Mutually Exclusive coding policies and editing as defined by CMS. Edit definitions are identified in the bulletin.

The second phase was implemented on November 1, 2012, for claims received on or after November 1, 2012, and is addressed in MA Bulletin 99-12-12 titled "[Federally Mandated Implementation: Updates to National Correct Coding Initiative \(NCCI\)](#)." This phase incorporated Medically Unlikely Edits or units of service limits as defined by CMS. This phase also included edit message updates that are identified in the bulletin.

While the types of NCCI program edits have not changed, CMS has added new program requirements and expanded claims adjudication rules including providing specific guidance for the implementation and use of NCCI related modifiers. These requirements are outlined in the most current version of the "Medicaid NCCI Edit Design Manual" located on the "CMS National Correct Coding Initiative (NCCI) in Medicaid" website and can be viewed by accessing the following link:

<http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Data-and-Systems/National-Correct-Coding-Initiative.html>

DISCUSSION:

This bulletin addresses the federally mandated requirement that every state must incorporate into its Medicaid Management Information System (MMIS) NCCI PTP-associated modifiers for HCPCS codes and CPT codes. CMS permits the use of NCCI PTP-associated modifiers when:

- Based on clinical circumstances; and,
- Used in accordance with HCPCS/CPT Manual instructions and definitions for the procedure code combination reported.

A complete listing of all NCCI PTP-associated modifiers is identified in Attachment B of this bulletin.

CMS indicates in their quarterly edit files which code pairs are eligible for an edit bypass when an NCCI PTP-associated modifier is reported. As a result, a modifier may be used in conjunction with a procedure code to allow for payment of both services within a code pair; however, MA policy will continue to be utilized in claims processing logic and any decision

making processes. This will ensure that services are processed in accordance with the most current regulations to prevent incorrect payment of claims.

The NCCI PTP-associated modifiers are as follows:

Anatomical modifiers: RT, LT, *E1, *E2, *E3, *E4, FA, F1, F2, F3, F4, F5, F6, F7, F8, F9, TA, T1, T2, T3, T4, T5, T6, T7, T8, T9, *LC, *LD, *LM, *RC, *RI

Non-anatomical modifiers: *24, *25, *27, *57, *58, *59, *78, *79, 91

*Denotes the NCCI PTP-associated modifiers that are not currently recognized by MA.

The following anatomical modifiers should be reported with the procedure codes indicated below. The modifiers will not affect the claim payment amount; however, failure to use these modifiers could result in a claim delay or denial.

Codes	Modifiers	Codes	Modifiers
15820	E2, E4	15821	E2, E4
15822	E1, E3	15823	E1, E3
33500	LC, LD, LM, RC, RI	33501	LC, LD, LM, RC, RI
33502	LC, LD, LM, RC, RI	33503	LC, LD, LM, RC, RI
33504	LC, LD, LM, RC, RI	33505	LC, LD, LM, RC, RI
33506	LC, LD, LM, RC, RI	33507	LC, LD, LM, RC, RI
33510	LC, LD, LM, RC, RI	33511	LC, LD, LM, RC, RI
33512	LC, LD, LM, RC, RI	33513	LC, LD, LM, RC, RI
33514	LC, LD, LM, RC, RI	33516	LC, LD, LM, RC, RI
33517	LC, LD, LM, RC, RI	33518	LC, LD, LM, RC, RI
33519	LC, LD, LM, RC, RI	33521	LC, LD, LM, RC, RI
33522	LC, LD, LM, RC, RI	33523	LC, LD, LM, RC, RI
33530	LC, LD, LM, RC, RI	33533	LC, LD, LM, RC, RI
33534	LC, LD, LM, RC, RI	33535	LC, LD, LM, RC, RI
33536	LC, LD, LM, RC, RI	33572	LC, LD, LM, RC, RI
65205	E1, E2, E3, E4	65210	E1, E2, E3, E4
67700	E1, E2, E3, E4	67710	E1, E2, E3, E4
67715	E1, E2, E3, E4	67800	E1, E2, E3, E4
67801	E1, E2, E3, E4	67805	E1, E2, E3, E4
67808	E1, E2, E3, E4	67810	E1, E2, E3, E4
67820	E1, E2, E3, E4	67825	E1, E2, E3, E4
67830	E1, E2, E3, E4	67835	E1, E2, E3, E4
67840	E1, E2, E3, E4	67850	E1, E2, E3, E4
67875	E1, E2, E3, E4	67880	E1, E2, E3, E4
67882	E1, E2, E3, E4	67901	E1, E3
67902	E1, E3	67903	E1, E3
67904	E1, E3	67906	E1, E3
67908	E1, E3	67909	E1, E3

67911	E1, E2, E3, E4	67912	E1, E3
67914	E1, E2, E3, E4	67915	E1, E2, E3, E4
67916	E1, E2, E3, E4	67917	E1, E2, E3, E4
67921	E1, E2, E3, E4	67922	E1, E2, E3, E4
67923	E1, E2, E3, E4	67924	E1, E2, E3, E4
67930	E1, E2, E3, E4	67935	E1, E2, E3, E4
67938	E1, E2, E3, E4	67950	E1, E2, E3, E4
67961	E1, E2, E3, E4	67966	E1, E2, E3, E4
67971	E1, E2, E3, E4	67973	E2, E4
67974	E1, E3	67975	E1, E2, E3, E4
68020	E1, E2, E3, E4	68100	E1, E2, E3, E4
68110	E1, E2, E3, E4	68115	E1, E2, E3, E4
68130	E1, E2, E3, E4	68135	E1, E2, E3, E4
68200	E1, E2, E3, E4	68320	E1, E2, E3, E4
68325	E1, E2, E3, E4	68326	E1, E2, E3, E4
68328	E1, E2, E3, E4	68330	E1, E2, E3, E4
68335	E1, E2, E3, E4	68340	E1, E2, E3, E4
68360	E1, E2, E3, E4	68362	E1, E2, E3, E4
68400	E1, E2, E3, E4	68420	E1, E2, E3, E4
68440	E1, E2, E3, E4	68500	E1, E2, E3, E4
68505	E1, E2, E3, E4	68510	E1, E2, E3, E4
68520	E1, E2, E3, E4	68525	E1, E2, E3, E4
68530	E1, E2, E3, E4	68540	E1, E2, E3, E4
68550	E1, E2, E3, E4	68700	E1, E2, E3, E4
68705	E1, E2, E3, E4	68720	E1, E2, E3, E4
68745	E1, E2, E3, E4	68750	E1, E2, E3, E4
68760	E1, E2, E3, E4	68761	E1, E2, E3, E4
68770	E1, E2, E3, E4	68811	E1, E2, E3, E4
68815	E1, E2, E3, E4	68816	E1, E2, E3, E4
68840	E1, E2, E3, E4	68850	E1, E2, E3, E4
92920	LC, LD, LM, RC, RI	92921	LC, LD, LM, RC, RI
92924	LC, LD, LM, RC, RI	92925	LC, LD, LM, RC, RI
92928	LC, LD, LM, RC, RI	92929	LC, LD, LM, RC, RI
92933	LC, LD, LM, RC, RI	92934	LC, LD, LM, RC, RI
92937	LC, LD, LM, RC, RI	92938	LC, LD, LM, RC, RI
92941	LC, LD, LM, RC, RI	92943	LC, LD, LM, RC, RI
92944	LC, LD, LM, RC, RI	92973	LC, LD, LM, RC, RI
92975	LC, LD, LM, RC, RI	92977	LC, LD, LM, RC, RI
92978	LC, LD, LM, RC, RI	93454	LC, LD, LM, RC, RI
93455	LC, LD, LM, RC, RI	93456	LC, LD, LM, RC, RI
93457	LC, LD, LM, RC, RI	93458	LC, LD, LM, RC, RI
93459	LC, LD, LM, RC, RI	93460	LC, LD, LM, RC, RI
93461	LC, LD, LM, RC, RI	93464	LC, LD, LM, RC, RI
93563	LC, LD, LM, RC, RI	93564	LC, LD, LM, RC, RI
93565	LC, LD, LM, RC, RI	93566	LC, LD, LM, RC, RI

93567	LC, LD, LM, RC, RI	93568	LC, LD, LM, RC, RI
-------	--------------------	-------	--------------------

The following procedure codes will have modifiers right (RT), left (LT) and bilateral (50) end-dated because they are being replaced with the appropriate anatomical modifier as indicated above.

Procedure Codes					
15820	15821	15822	15823	65210	67810
67820	67901	67908	67909	67911	67912
67973	67974	68420	68745	68750	68816

Modifier 24 and modifier 25 may be reported with the following procedure codes for the provider type/specialty (PT/Spec) combinations indicated below:

Procedure Code	PT/Spec	Procedure Code	PT/Spec	Procedure Code	PT/Spec
92002	18/180 31/330	92004	18/180 31/All	92012	18/180 31/330
92014	18/180 31/All	92018	31/All	92019	31/All
96040	31/All				

Modifier 27 may be reported with the following procedure codes for the PT/Spec combinations indicated below:

Procedure Code	PT/Spec	Procedure Code	PT/Spec	Procedure Code	PT/Spec
92002	01/183	92004	01/183	92012	01/183
92014	01/183	95250	01/183	96040	01/183
99281	01/017	99282	01/017	99283	01/017
99284	01/017	99285	01/017		

Modifier 57 may be reported with the following procedure codes for the PT/Spec combinations indicated below:

Procedure Code	PT/Spec	Procedure Code	PT/Spec	Procedure Code	PT/Spec
92002	31/330	92004	31/All	92012	31/330
92014	31/All	92018	31/All	92019	31/All
96040	31/All				

Modifier 59 may be reported with the procedure codes indicated below:

Procedure Code	Procedure Code
G0462	V5014

Modifier 78 may be reported with the following procedure codes for the PT/Spec combinations indicated below:

Procedure Code	PT/Spec	Procedure Code	PT/Spec	Procedure Code	PT/Spec
70557	31/341	70558	31/341	70559	31/341
74235	31/All	74300	31/All	74301	31/All
74305	31/All	74320	31/All	74327	31/All
74328	31/All	74329	31/All	74330	31/All
74340	31/All	74355	31/All	74360	31/All
74363	31/All	74420	31/All	74425	31/All
74455	31/All	74475	31/All	74480	31/All
74485	31/All	75574	31/All	75600	31/All
75605	31/All	75625	31/All	75630	31/All
75635	31/All	75658	31/All	75705	31/All
75710	31/All	75716	31/All	75726	31/All

75731	31/All	75733	31/All	75736	31/All
75741	31/All	75743	31/All	75746	31/All
75756	31/All	75774	31/All	75791	31/All
75801	31/All	75803	31/All	75805	31/All
75807	31/All	75809	31/All	75810	31/All
75820	31/All	75822	31/All	75825	31/All
75827	31/All	75831	31/All	75833	31/All
75840	31/All	75842	31/All	75860	31/All
75870	31/All	75872	31/All	75880	31/All
75885	31/All	75887	31/All	75889	31/All
75891	31/All	75893	31/All	75894	31/All
75896	31/All	75898	31/341	75901	31/All
75902	31/All	75952	31/All	75953	31/All
75954	31/All	75956	31/All	75957	31/All
75958	31/All	75959	31/All	75962	31/All
75964	31/All	75966	31/All	75968	31/All
75970	31/All	75978	31/All	75980	31/All
75982	31/All	75984	31/All	75989	31/All
76001	31/341	76930	31/All	76932	31/All
76936	31/All	76937	31/All	76940	31/All
76941	31/All	76942	31/All	76945	31/All
76946	31/All	76950	31/All	76975	31/All
76998	31/341	77001	31/All	77002	31/All

77003	31/All	77750	31/All	77761	31/All
77762	31/All	77763	31/All	77776	31/All
77777	31/All	77778	31/All	77785	31/All
77786	31/All	77787	31/All	77789	31/All
79200	31/All	79300	31/All	91010	31/All
91013	31/All	91030	31/All	91034	31/All
91035	31/All	91037	31/All	91038	31/All
91040	31/All	92502	31/All	92612	31/318 31/322 31/332 31/338 31/341
92613	31/318 31/322 31/332 31/338 31/341	92614	31/318 31/322 31/332 31/338 31/341	92615	31/318 31/322 31/332 31/338 31/341
92616	31/338	92617	31/318 31/322 31/332 31/338 31/341	92920	31/All
92921	31/All	92924	31/All	92925	31/All
92928	31/All	92929	31/All	92933	31/All
92934	31/All	92937	31/All	92938	31/All
92941	31/All	92943	31/All	92944	31/All
92960	31/All	92973	31/All	92975	31/All
92977	31/All	92978	31/All	92986	31/All
92987	31/All	92990	31/All	92992	31/All
92993	31/All	92997	31/All	92998	31/All

93303	31/All	93304	31/All	93306	31/All
93307	31/All	93308	31/All	93312	31/All
93313	31/All	93314	31/All	93317	31/All
93320	31/All	93321	31/All	93350	31/All
93451	31/All	93452	31/All	93453	31/All
93454	31/All	93455	31/All	93456	31/All
93457	31/All	93458	31/All	93459	31/All
93460	31/All	93461	31/All	93462	31/All
93464	31/All	93503	31/All	93505	31/All
93530	31/All	93531	31/All	93532	31/All
93533	31/All	93561	31/All	93562	31/All
93563	31/All	93564	31/All	93565	31/All
93566	31/All	93567	31/All	93568	31/All
93580	31/318 31/319 31/322 31/345	93581	31/318 31/319	93582	31/All
93583	31/All	93600	31/All	93602	31/All
93603	31/All	93609	31/All	93610	31/All
93612	31/All	93615	31/All	93616	31/All
93618	31/All	93619	31/319 31/322 31/341	93620	31/319 31/322 31/341
93621	31/319 31/322 31/341	93622	31/319 31/322 31/341	93623	31/319 31/322 31/341
93624	31/319 31/322 31/341	93631	31/All	93640	31/All

93641	31/All	93642	31/All	93650	31/All
93653	31/All	93654	31/All	93655	31/All
93656	31/All	93657	31/All	95955	31/All
95961	31/All	95962	31/All	95971	31/All
95972	31/All	95973	31/All	95974	31/All
95975	31/All	95991	31/311 31/318 31/319 31/322 31/336 31/338 31/345	97597	14/140 31/All
97598	14/140 31/All	97602	14/140 31/All	G0458	31/All

Modifier 91 may be reported with procedure code G0462.

PROCEDURE:

Effective for dates of service on and after September 15, 2014, the Department will allow the submission of NCCI PTP-associated modifiers with the procedure codes indicated above. If CMS adds or expands NCCI program requirements related to the use and implementation of modifiers, that information will be included in an updated bulletin. If the Department makes any changes to the use and implementation of modifiers, that information will also be included in an updated bulletin.

CMS has not provided specific guidance to indicate modifiers can be reported with procedure codes subject to MUE's.

Reminders

Providers should use the MA Program Fee Schedule, as well as the appropriate coding manuals and clinical guidelines, to ensure that claims are submitted with the correct procedure codes and modifiers for the service provided to reduce unnecessary claim denials and ensure correct payment of services.

Please note: Current MA procedures surrounding the payment and reimbursement amount for services submitted with a valid NCCI related modifier will remain the same. The requirements in the billing guidelines and claims processing time-frames will not be affected by the implementation of NCCI related modifiers. In addition, claims will continue to be subject to the appropriate edits and audits to ensure that services are

processed in accordance with the most current, appropriate regulations to prevent incorrect payment of claims.

Modifier 50 identifies a procedure that is performed bilaterally. This modifier is currently recognized by MA and its usage has not changed as outlined in QuickTip #68 titled "[Using the 50 Modifier on Medical Assistance \(MA\) Claims.](#)"

Attachment A: NCCI Claims Criteria

Attachment B: NCCI PTP-associated Modifiers and Descriptions

REFERENCES AND RESOURCES:

CMS National Correct Coding Initiative (NCCI) in Medicaid website:

<http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Data-and-Systems/National-Correct-Coding-Initiative.html>