

Emblem Health-GHI Plans-Modifier 25 with Evaluation and Management Services Reported with Procedures

August 28, 2018

Modifier 25 is used to define a substantial, separately identifiable evaluation and management (E/M) service that was performed at the same time as a procedure.

Commencing October 30, 2018, Emblem Health's current coding policy will apply to GHI plans regarding E/M services billed with modifier 25 within 28 days of a previous face-to-face service. The E/M service will be denied when both of the following apply:

- ⇒ The E/M service (92002-92004, 92012-92014, 99201-99380, 9944-99499) is billed with modifier 25 on the same day as a procedure with a 0-day, 10-day, or 90-day postoperative period.
- ⇒ The patient has a had a face-to-face service with the same provider for the same condition as the E/M service, and the 0-day, 10-day or 90-day procedure within the previous 28 days.

Face-to-face service codes included in this medical policy:
10021-36410, 36420-44680, 44800-69990, 90935-90993,
92002-92371, 92502-92504, 92511, 95831-95852, 96365-
96379, 96405-96406, 96440, 96450, 96542-96999, 97597-
97755, 97802-98943, 99100-99170, 99201-99285, 99291-
99337, 99341-99357