



CMS Announcement –Changes to the use of Modifier -59 , effective January 1, 2015. You can review the MEDLearns information [HERE](#).

The Medicare National Correct Coding Initiative (NCCI) has Procedure to Procedure (PTP) edits to prevent unbundling of services, and the consequent overpayment to physicians and outpatient facilities. The underlying principle is that the second code defines a subset of the work of the first code. Reporting the codes separately is inappropriate. Separate reporting would trigger a separate payment and would constitute double billing. Modifier -59 was originally developed to indicate those situations that were outside the norm, and did not represent double billing. However, the modifier has been the subject of many audits, and is often found to be used inappropriately. CMS is introducing new modifiers to more specifically spell out why a service is not part of another procedure. Modifier -59 has not been discontinued, but cannot be used for any of the situations covered by the new modifiers.

Effective: January 1, 2015 there are four new HCPCS modifiers to define subsets of the -59 modifier, a modifier used to define a “Distinct Procedural Service.” Please make sure your billing staffs are aware of the coding modifier changes. The new HCPCS modifiers are collectively referred to as –X {EPSU} modifiers:

- XE Separate Encounter- A service that is distinct because it occurred during a separate encounter.
- XS Separate Structure- A service that is distinct because it was performed on a separate organ/structure.
- XP Separate Practitioner- A service that is distinct because it was performed by a different practitioner.
- XU Unusual Non-Overlapping Service- The use of a service that is distinct because it does not overlap usual components of the main service.

CMS will not stop recognizing the -59 modifier but notes that CPT instructions state that the -59 modifier should not be used when a more descriptive modifier is available. CMS will continue to recognize the -59 modifier in many instances but may selectively require a more specific - X {EPSU} modifier for billing certain codes at high risk for incorrect billing. For example, a particular NCCI PTP code pair may be identified as payable only with the - XE separate encounter modifier but not the -59 or other - X {EPSU} modifiers. The - X {EPSU} modifiers are more selective versions of the -59 modifier so it would be incorrect to include both modifiers on the same line.

CMS recommends the use of the new HCPCS modifiers in place of the -59 modifier whenever possible. SCAN also encourages all physicians, providers and billing staff to familiarize yourselves with these new HCPCS modifiers and implement them into your billing systems as directed by CMS. Effective starting date of service for use of HCPCS modifiers –X {EPSU} is January 1, 2015.