

Modifier Clinic: Advanced Hospital Outpatient Issues

OBJECTIVE: This program will provide a brief review of the official Medicare guidelines for hospital reporting of modifiers. Most of the content will focus on an extensive review of “real life” outpatient cases, bills, and management reports reflecting modifiers.

AUDIENCE: Compliance Auditors, Coding Managers, Reimbursement Specialists, Coding Specialists, ALL hospital staff responsible for outpatient coding including registration, emergency room, ancillary department and hospital-based clinic staff.

DURATION: 6 hours

CURRICULUM:

I. Modifier Official Medicare Guidelines

- A. Modifier –59/Distinct Procedural Service
- B. Modifier –52/Reduced Services
- C. Modifier –73/Discontinued Surgery Before Anesthesia
- D. Modifier –74/Discontinued Surgery After Anesthesia
- E. Modifier –91/Repeat Laboratory Tests on Same Date
- F. Modifier –25/Separate Evaluation and Management Service
- G. Modifier –27/Multiple E/M Encounters on Same Date

II. Case Studies

Operative Report Case Studies with Modifiers Reported
UB-04 Claim Case Studies with Modifier Issues

III. Modifier Management Reports

Daily Outpatient Visits
Radiology Outpatient Visits
Outpatient Code Editor (OCE) Error Report