

Part B Insider (Multispecialty) Coding Alert

Biggest Mistakes With Modifiers -51 and -59

Coders mistakenly apply both modifiers -51 (Multiple procedures) and -59 (Distinct procedural service) on multiple procedures, consultant **Ken Lobo** says. "One should use either modifier -51 or modifier -59, but never both together." Since modifier -51 lets the carrier know that multiple procedures can be paid at a discount, and modifier -59 asks for the full payment, the two modifiers are contradictory.

Also, coders sometimes apply modifier -59 when it's already clear that the procedures involved were distinct and separate. You don't need any modifier if two procedures are obviously unrelated, Lobo says. For example, if you [bill code 11750](#) (Excision of nail and nail matrix, partial or complete, for permanent removal) on toes TA and T5, the two procedures are obviously separate because these toes are on different feet. It's obvious the physician had to perform the whole procedure, from beginning to end, on each foot separately, Lobo says.