

Part B Insider (Multispecialty) Coding Alert

Reader Question: MACs May Differ on Modifier Policies

Question: If we perform a duplex scan of both upper extremities and of both lower extremities, can we enter 93970 twice with a modifier 59?

Answer: Experts agree that when complete bilateral upper and complete bilateral lower studies are performed on the same date, you may report 93970 (Duplex scan of extremity veins including responses to compression and other maneuvers; complete bilateral study) two times with modifier 59 (Distinct procedural service) appended to the second code.

For authoritative support, check your payer's policy.

For example: Highmark Medicare's policy states, "If a complete or limited bilateral study is done on both the upper and the lower extremities, the corresponding code can be reported once for each study performed (i.e., once for the upper extremities and once for the lower extremities). Providers should append modifier 59, distinct procedural service, to the second code to indicate that two separate, distinct studies were performed."

Additionally, Highmark states, "There should be a separate written report/interpretation for each study performed."

Source: You'll find the Highmark article, "Non-Invasive Peripheral Venous Studies," at www.highmarkmedicare.com/articles/mac-ab/a47801-r6.html. Affected providers include those in Pennsylvania, Maryland, District of Columbia, New Jersey, and Delaware.