

Part B Insider (Multispecialty) Coding Alert

Reader Questions: Bilateral Done On 1 Side Means 52

Question:

A patient underwent a hysteroscopy. The code 58565 represents a bilateral procedure, but in this case the physician only fulgurated one fallopian tube using the scope. Do I need to modify my coding?

Answer:

Yes. You will need to append modifier 52 (Reduced services) to 58565 (Hysteroscopy, surgical; with bilateral fallopian tube cannulation to induce occlusion by placement of permanent implants) to show that your physician did not perform the procedure exactly as described in the code descriptor. You should use modifier 52 when services your physician performs are less than those described by the code. For instance, you can use modifier 52 when the doctor performs a service/procedure unilaterally when the code specifies "bilateral." In such a case, before appending modifier 52, you must be certain that there is no designated CPT code to describe the lesser procedure.