

Eli's Rehab Report

Industry Notes: Know Your Therapy Modifiers for Claims Success

Therapists who have been submitting claims to Medicare with the therapy modifiers for their services should start checking their modifiers a bit more carefully. That's the word from a Feb. 6 MLN Matters article, which cautions therapists not to interchange their modifiers on claims.

"Through analysis of original Medicare claims data, CMS has identified cases where claims for discipline specific evaluation codes have reported the modifier corresponding to another discipline," CMS says in MLN Matters article MM8556. "For example, occupational therapy evaluations have been billed and paid while reporting a GP modifier (Services delivered under an outpatient physical therapy plan of care)."

In cases where the information on a claim is contradictory like this one, MACs will now be returning the claim to you for correction before payment. The contractors will institute edits to thwart this problem starting on July 1, 2014, the article adds.

To read the complete article, visit

www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM8556.pdf.