

Outpatient Facility Coding Alert

Modifier News: Simplify Your Life When You Code Multiple Encounters on the Same Day: Here's How

Knowing which codes qualify for -27 is your first step toward success.

When your physicians provide multiple evaluation and management (E/M) services for a patient in multiple outpatient settings on the same day, don't assume you can only code for one encounter. Modifier 27 (Multiple outpatient hospital E/M encounters on the same date) can come to your rescue, if you know how to use it.

Guideline: The CMS handbook states that multiple services with distinct E/M encounters performed in multiple outpatient hospital settings on the same date can be reported by adding modifier 27 to each outpatient and/or E/M code(s).

Key points: Keep these simple instructions in mind when deciding whether modifier 27 is appropriate:

- Use this modifier if a patient was seen in two different hospital-based clinics on the same date of service (hospital emergency department, outpatient clinic, etc.)
- Only append modifier 27 to E/M service codes within the range of 92002-92014, 99201-99499, and with healthcare common procedure coding system codes G0463 (Hospital outpatient clinic visit for assessment and management of a patient), G0101 (Cervical or vaginal cancer screening; pelvic and clinical breast examination) and G0175 (Scheduled interdisciplinary team conference [minimum of three exclusive of patient care nursing staff] with patient present)
- Append this modifier to the second subsequent E/M code when more than one E/M service is provided that same day in the same or different hospital outpatient setting.

Scenario example: Ms. Smith, a 35-year-old female, is seen for a pain management issue at the hospital pain clinic at 10:00 a.m. Later that afternoon she is involved in a minor MVA and is taken to the emergency department for evaluation and laceration repair.

As the coding specialist, you might be responsible for coding the services provided in all your facilities, including the clinic as well as the ED. Ms. Smith was seen in two different hospital outpatient locations on the same day. First, you would code the E/M for the pain clinic visit. Second, you would report the services that she received in the ED, which included evaluation and wound repair. Without the use of modifier 27, you might have difficulty in getting the claim reimbursed because the third-party payer may not realize these are two separate encounters.

Tip: The use of modifier □27 must be supported by the documentation in the patient's medical record.