

Modifier Coding Alert

Reader Question: Attach KX Modifier to Therapy Claims Exceeding the Cap

Question: I work in a PT office and we have several patients who have exceeded the therapy cap. How do I code them so that the office gets paid?

Florida Subscriber

Answer: If your patients qualify for a therapy cap exception, you must add a KX modifier (Requirements specified in the medical policy have been met) to the therapy that is subject to the cap limits. Do not add the KX to any service that is not a medically necessary service.

Tip: To qualify for the exception the clinician attests that the services are medically necessary and justification is well documented in the medical record.

When a physical, speech-language, or occupational therapy service exceeds the caps, you must indicate that the service is medically necessary by adding the KX modifier to each therapy service that uses modifiers GN (Services delivered under an outpatient speech language pathology plan of care), GO (Services delivered under an outpatient occupational therapy plan of care), or GP (Services delivered under an outpatient physical therapy plan of care).

News to know: According to CMS, the exceptions process for outpatient therapy caps has been extended through March 31, 2015. This was signed into law with the postponement of the physicians' Medicare payment rate cuts and the ICD-10 deadline.