

## Modifier Coding Alert

### Reader Question: Use AI for the Principal Physician

**Question:** My physician admitted a patient to the hospital and a specialist performed surgery later that day. Which provider gets paid for the admission?

Iowa Subscriber

**Answer:** Your physician's documentation will point you in the right direction. Sometimes a physician will call the hospital and arrange for a patient to be admitted, but won't actually see the patient that day. If the physician was a hospitalist, she may see the patient that day.

If your physician saw the patient and documented the admitting note, providing the documentation supports the service, she can bill the initial hospital visit. You should code the appropriate level of service from the 99221-99223 (Initial hospital care, ...) range for your physician and attach modifier AI (Principal physician of record). This shows that she admitted the patient.

If the documentation supports that the specialist performed an E/M service that led to the decision for surgery, you can code from the 99221-99223 range for the specialist's service as well. Attach modifier 57 (Decision for surgery) along with the appropriate procedural code for the surgery. You wouldn't attach modifier AI because the specialist was not the admitting physician.

**Remember:** You'll use modifier AI for the following four reasons:

- Informational purposes
- Inpatient services only
- The provider who is responsible for the overall care of the patient
- Attach it to the admitting physician's initial hospital visit code.