Modifier Coding Alert

You Be the Coder: Be Careful Matching Your Modifiers to the Record

Question: I coded a claim with anesthesia code 00140 with 3.5 units and modifier QS and 15823 with modifiers LT, RT, and SG. Medicare said the modifier is inconsistent or the claim is missing a modifier. Why did I receive a denial?

Wisconsin Subscriber

Answer: If you are coding for the anesthesiologist, the correct anesthesia code for 15823 (Blepharoplasty, upper eyelid; with excessive skin weighting down lid) is 00103 (Anesthesia for reconstructive procedures of eyelid [eg, blepharoplasty, ptosis surgery]), not 00140 (Anesthesia for procedures on eye; not otherwise specified).

Modifier QS (Monitored anesthesia care service) suggests moderate sedation and not all payers, including Medicare, accept this modifier. This is usually performed by the surgeon, thus the anesthesiologist would not use it.

You'll use modifiers RT (Right side) or LT (Left side) if your surgeon performed the procedure on only one eye. If he performed surgery on both eyes, you should use modifier 50 (Bilateral procedure) instead.

If the surgery took place in an ambulatory surgical center (ASC), you can use modifier SG (Ambulatory surgical center [asc] facility service) because 15823 is a payable service in an ASC. Then you need the corresponding place of service (POS) 24 (Ambulatory surgical center).

For the physician: If you are coding for the eye doctor who performs the procedure, you will report 15823. Depending on the age of the patient and the sedation length of time, you will choose from the 99143-99145 (Moderate sedation services [other than those services described by codes 00100-01999] provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of the patient's level of consciousness and physiological status; ...) code range if the surgeon performed moderate sedation as well.

You don't need modifier QS because the 99143-99145 procedure codes denote moderate sedation. Append RT, LT, or 50 to 15823 depending on if the surgery is on one eye or both and SG for the ASC