

As of January 1, 2015, CMS made changes to how modifier -59 should be used.

Currently the -59, which indicates that a given code represents a service distinct from others performed on the same day, is the most widely used HCPCS modifier. Current guidelines result in the -59 being used incorrectly on a frequent basis, and as a result of this misuse there is a high risk of overpayment and audit from OIG, RAC, or MAC. The Wilshire Group understands that the use of this modifier crosses disciplines within your organization (HIM/Coding, PFS/billing, and compliance/auditing) and we have the operational knowledge and Epic system expertise to help you implement changes to the modifier -59 effectively.

The current state of modifier -59 allows for use across varied root causes, including: separate encounters, distinct anatomic sites, and different performer providers. Effective January 1, 2015, though not mandatory, the CMS changes will move the -59 usage into four more specific modifiers that are subsets of current modifier -59 use. CMS will continue to recognize and accept modifier -59 until a date to be determined, but you need to be ready before the final determination is made. The new modifiers in line to replace -59 are outlined in the table below (Fig. 1).

Modifier	Description	Characteristics for Use
XE	Separate Encounter	Distinct for having occurred within a separate clinical encounter
XS	Separate Structure	Distinct due to being performed on a separate organ or part of the body
XP	Separate Practitioner	Distinct due to being performed by a different provider
XU	Unusual Non-Overlapping Service	Distinct in that it does not overlap normal components of the primary service being provided

Fig. 1

It is possible to configure the system for use of the -X modifiers before you intend to include them on Medicare claims. This can allow you to train staff appropriately, monitor use, and make corrections before the actions of your clinical and revenue cycle teams have a direct impact on reimbursement. Proactive system setup also allows for thorough testing and reduced risk when use becomes mandatory.

Key questions you should ask relate to which roles in your organization are impacted by the -X modifier additions:

- **What are the critical questions that impacted staff members need to ask to ensure effective results?**
- **How should you prepare your Epic applications including Radiant, EpicCare, Charge Router, and Resolute Billing and Claims?**