REIMBURSEMENT POLICY STATEMENT Michigan Medicaid Policy Name & Number

Modifiers-MI MCD-PY-1449 Effective Date: 06/01/2024



A. Subject **Modifiers**

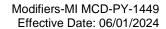
B. Background

Reimbursement policies are designed to assist providers when submitting claims to CareSource and are routinely updated to promote accurate coding and provide policy clarification. These proprietary policies are not a guarantee of payment. Reimbursement for claims may be subject to limitations and/or qualifications. Reimbursement will be established based upon a review of the actual services provided to a member and will be determined when the claim is received for processing. Health care providers and office staff are encouraged to use self-

Reimbursement modifiers are two-digit codes that provide a way for physicians and other qualified health care professionals to indicate that a service or procedure has been altered by some specific circumstance. Modifiers can be found in the appendices of both CPT and HCPCS manuals. Use of a modifier does not change the code or the definition. Examples of modifiers use include:

- To differentiate between the surgeon, assistant surgeon, and facility fee claims for the same procedure.
- To indicate that a procedure was performed on the left side, right side, or bilaterally.
- To report multiple procedures performed during the same session by the same health care provider.
- To indicate multiple health care professionals participated in the procedure.
- To indicate a subsequent procedure is due to a complication of the initial procedure.

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H. References 1.