

## 2023 Modifier Table for All Products

The following table lists all modifiers on the HealthPartners standard modifier table that affect payment on Medicare, Medicaid and commercial claims by either increasing or decreasing the allowable amount. HealthPartners follows the CMS modifier increases or decreases or the industry standards for various modifiers. Beginning January 1, 2022, HealthPartners will be able to increase or decrease up to four modifiers on each claim line. Some modifiers are addressed in separate policies, so please review the specific policy for additional information on the identified modifiers below.

Modifier	Modifier Description	Percent of Allowable
22	Increased procedural services	110%
25	Significant, separately identifiable evaluation and management service by the same physician on the same day of the procedure or other service	100/50/0/0
50	Bilateral procedure	See Bilateral Billing Guidelines Policy
51	Multiple Surgeries	See Multiple Surgeries Billing Guideline Policy
52	Reduced services	50%
53	Discontinued Procedure	50%
54	Surgical care only	Varies per MPPR Policy
55	Postoperative management only	Varies per MPPR Policy
56	Preoperative management only	Varies per MPPR Policy
62	Two surgeons	Varies per MPPR Policy
66	Three or more surgeons	62.50%
78	Unplanned return to operating or procedure room	Varies per MPPR Policy
80	Assistant surgeon	See Assistant Surgeon Services Policy
81	Minimum assistant surgeon	See Assistant Surgeon Services Policy
82	Assistant surgeon (when qualified resident surgeon not available)	See Assistant Surgeon Services Policy
AS	Physician assistant, nurse practitioner, or clinical nurse specialist services for assistant at surgery	See Assistant Surgeon Services Policy
CO	Outpatient occupational therapy services	85%

CQ	Outpatient physical therapy services	85%
CT	Computed Tomography Services Furnished	85%
FB	Item provided without cost to provider, supplier or practitioner, or full credit received for replaced device (examples, but not limited to, covered under warranty, replaced due to defect, free samples)	0%
FC	Partial credit received for replaced device	100%
FX	X-Ray Taken Using Film	80%
FY	Computer Radiography X-Ray	90%
GZ	Item or service expected to be denied as not reasonable or necessary	0%
PA	Surgical or other invasive procedure on wrong body part	See Never Events Policy
PB	Surgical or other invasive procedure on wrong patient	See Never Events Policy
PC	Wrong surgery or other invasive procedure on patient	See Never Events Policy
PM	Post Mortem	100%
SH	Second Concurrently Administered Infusion Therapy (non transportation codes)	50%
SJ	Third or more Concurrently Administered Infusion Therapy (non transportation codes)	50%
XE	Separate encounter	100%
XS	Separate structure	100%
XP	Separate practitioner	100%
XU	Unusual non-overlapping services	100%