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HIGHMARK CODING TIPS

Modifier 25

CPT describes Modifier 25 as; A Significant, Separately Identifiable Evaluation and Management Service by the Same Physician or Other Qualified Health Care Professional on the Same Day of the Procedure or Other Service.

It may be necessary to indicate on the day a procedure or service identified by a CPT code was performed, the patient's condition required a significant, separately identifiable E/M service above and beyond the other service provided or beyond the usual preoperative and postoperative care associated with the procedure that performed. A significant, separately identifiable E/M service is defined or substantiated by documentation that satisfies the relevant criteria for the respective E/M service to be reported. The E/M service may be prompted by the symptom or condition for which the procedure and/or service was provided. As such, different diagnoses are not required for the reporting of the E/M services on the same date. This circumstance may be reported by adding modifier 25 to the appropriate level of E/M service. Note: Modifier 25 is not used to report an E/M service that resulted in a decision to perform surgery. See modifier 57 when the E/M service resulted in a decision to perform surgery. See modifier 59 when the service is a non-E/M distinct and separately identifiable service.

When modifier 25 is reported, the patient's medical records must clearly document separately identifiable medical care was rendered and reported at the appropriate level based on the complexity of medical decision making.

Please refer to the Highmark Provider Manual, Medical and Reimbursement policies for additional information.

Moderate (Conscious) Sedation

Per CPT, moderate sedation is a drug-induced depression of consciousness during which patients respond purposefully to verbal commands, either alone or accompanied by light tactile stimulation. No interventions are required to maintain cardiovascular function or a patent airway, and spontaneous ventilation is adequate.

- For purposes of reporting, intraservice time of moderate sedation is used to select the appropriate code(s) which include 99151, 99152, 99153, 99155, 99156 and 99157. Codes 99151, 99152, 99155 and 99156 are used to report the first 15 minutes of intraservice time for moderate sedation. If total intraservice time for moderate sedation is less than 10 minutes, moderate sedation is not reported separately for any age. (Per chart in CPT)

Selection of the appropriate code is determined by the patient's age and whether the moderate sedation services are provided by the same physician performing the diagnostic or therapeutic service or by a qualified health care professional other than the physician performing the diagnostic or therapeutic service. Codes 99153 and 99157 are reported for each additional 15 minutes, in addition to the code for the primary service. More than half of the next increment (8 minutes) must have elapsed in order to report an additional 15 minutes of moderate sedation.

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Code selection is dependent upon the intraservice work provided. CPT lists the criteria for intraservice time:

- Begins with the administration of the sedating agent(s);
- Ends when the procedure is completed, the patient is stable for recovery status, and the physician or other qualified health care professional providing the sedation ends personal continuous face-to-face time with the patient;
- Includes ordering and/or administering the initial and subsequent doses of sedating agents;
- Requires continuous face-to-face attendance of the physician or other qualified health care professional;
- Requires monitoring patient response to the sedating agents, including:
    - Periodic assessment of the patient;
    - Further administration of agent(s) as needed to maintain sedation; and
    - Monitoring of oxygen saturation, heart rate, and blood pressure.

If the physician or other qualified health care professional who provides the sedation services also performs the procedure supported by sedation, the physician or other qualified health care professional will supervise and direct an independent trained observer who will assist in monitoring the patient's level of consciousness and physiological status throughout the procedure.

Documentation must include the start and stop time of the intraservice time and must indicate that the patient was able to maintain his or her own airway and ventilation.

CPT also lists criteria for pre-service and post-service activities included in the work described by the moderate (conscious) sedation codes. Providers should review these activities to be sure that pre- and post-service activities are not included when determining intraservice time for reporting.

Highmark Reimbursement Policy RP-033 states time for moderate (conscious) sedation should be reported in units, not minutes. A time unit is a measure of each fifteen (15) minute interval. Time units are calculated by dividing the total minutes of anesthesia time reported by fifteen (15) and rounding to one decimal place.