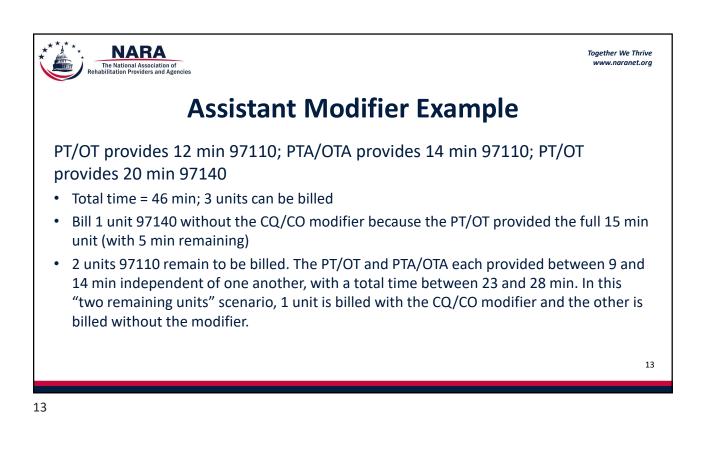


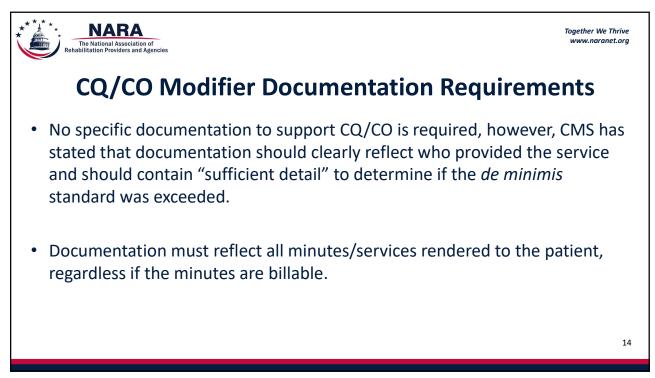
Assistant Modifier Example

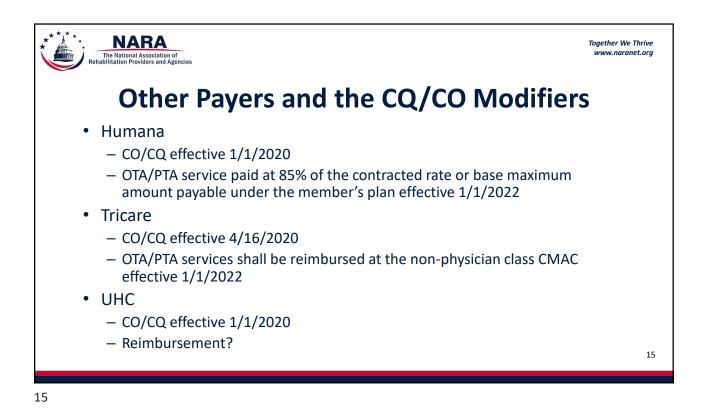
PTA/OTA provides 22 min 97110; PT/OT provides 23 min 97110

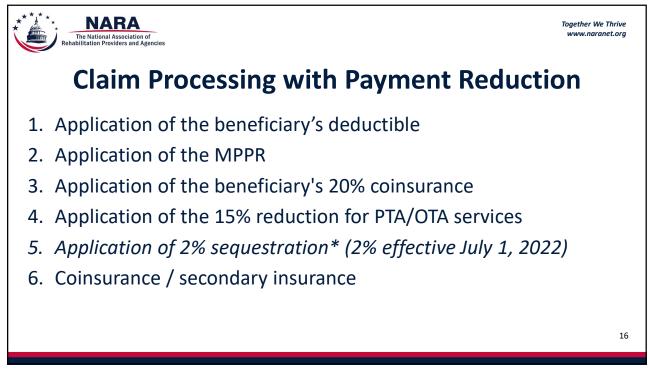
- Total time = 45 min; 3 units can be billed
- Bill 1 unit 97110 with the CQ/CO modifier because the PTA/OTA provided 15 min with 7 min remaining
- Bill 1 unit 97110 without the CQ/CO modifier because the PT/OT provided 15 min with 8 min remaining
- Apply the 8 min rule to the final unit of 97110 and bill <u>without</u> the CQ/CO modifier because the therapist provided enough minutes (8 or more) to bill the final unit without the assistant's minutes

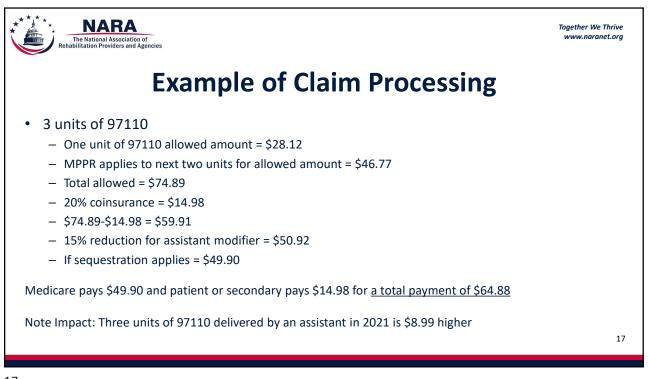
12

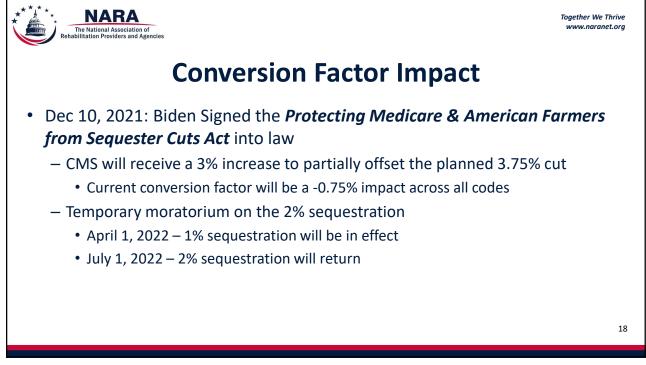






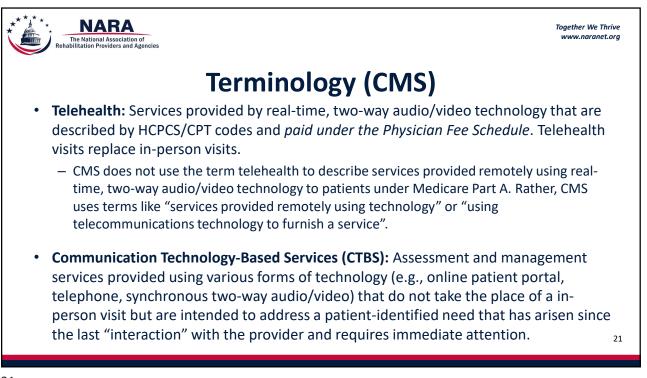


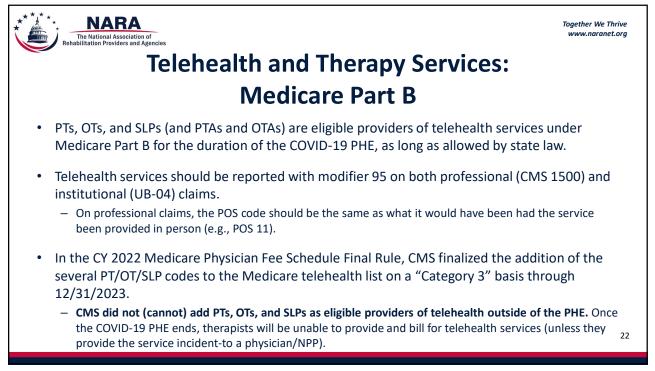


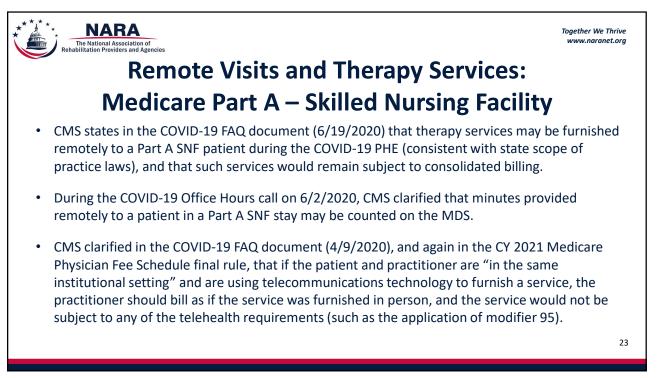


*****	NAR The National Assoc Rehabilitation Providers	ciation of									We Thrive aranet.org
Ех	ampl	e o	f Co	nversi	ion	Factor	on	Spe	cific	Cod	es
• On	average, 97	530 de	creased b	y ~6%							
REND PROV	/ SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC	AMT	PROV PI
1235618786	1109 110921		97530 GP		49.00	37.92 <mark>\$35.6</mark>			CO-45	11.08	30.3
	1109 110921	11 1	97112 GP		45.00	26.09	0.00	5.22	CO-45 CO-59	10.88 8.03	20.8
	1109 110921	11 1	97110 GP		42.00	22.87	0.00	4.57	CO-45	12.57	18.3
									CO-59	6.56	
	1109 110921	11 1	97140 GP		45.00	21.36	0.00	4.27	CO-45	17.91	17.0
PT RESP	21.64 CL	Μ στατισ	19 CLAIM	TOTALS	181.00	108.24	0.00	21.64	CO-59	5.73 72.76	86.6
BILL TYPE			TO TOTALS:		181.00		LATE FILING		0.00	NET	86.60
• Una	attended Est	im dec	reased on	average by	~8%						
	1028 102821	1	G0283 GPCQ		18.22	9,69 \$8.91	0.00	1.94	CO-59	8.53	7.75
	1026 102621		97110 GP		68.29	22.84	0.00	4.57	CO-59	45.45	18.27
	1028 102821	2	97110 GPCQ		136.58	45.68	0.00	9.14	CO-59	90.90	36.54
	1028 102821		97112 GPCQ		71.23	33.82	0.00		CO-45	37.41	27.06
	1026 102621		97162 GP		161.03	98.01	0.00	19.60	CO-45	63.02	78.41
PT RESP	42.01 CL				455.35	210.04	0.00	42.01	0.00	245.31	168.03
RILL LADE	742 DRG CD	ADJ	TO TOTALS:	INTEREST		0.00 L	ATE FILING	CHARGE	0.00	NET	168.03
											19

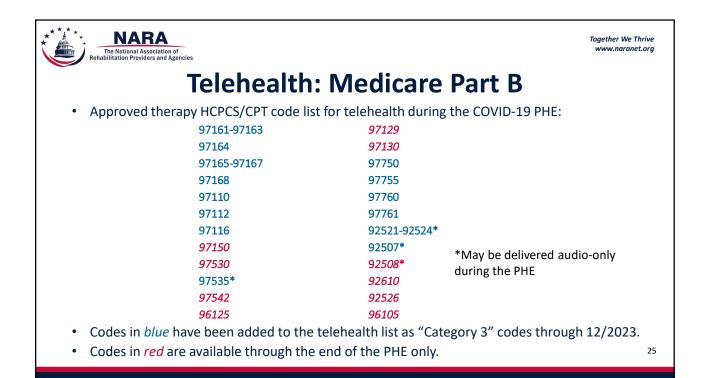




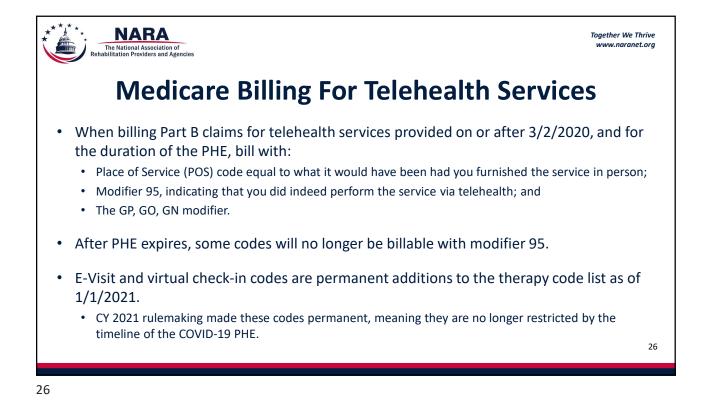




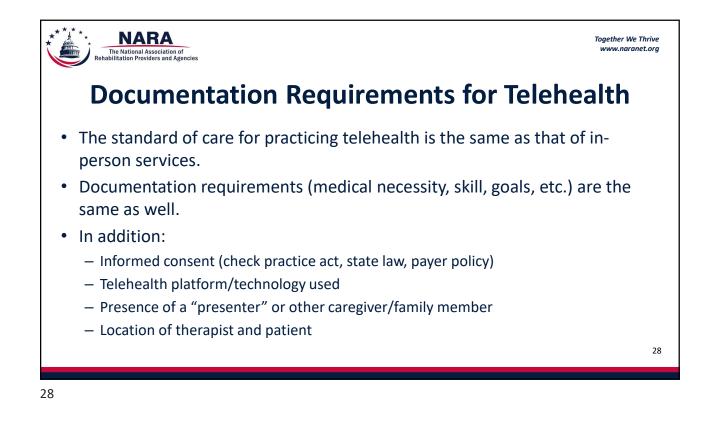




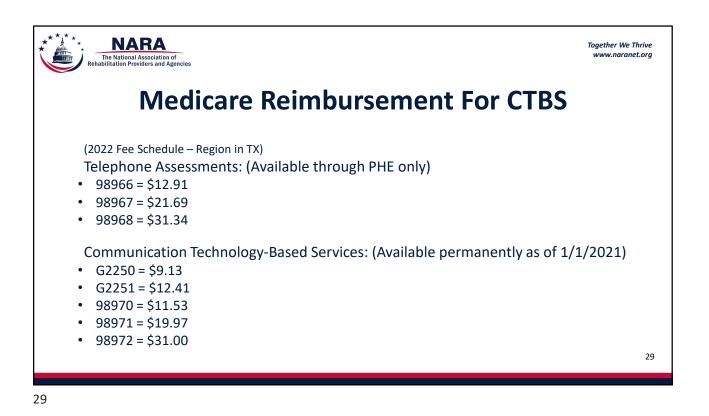
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25
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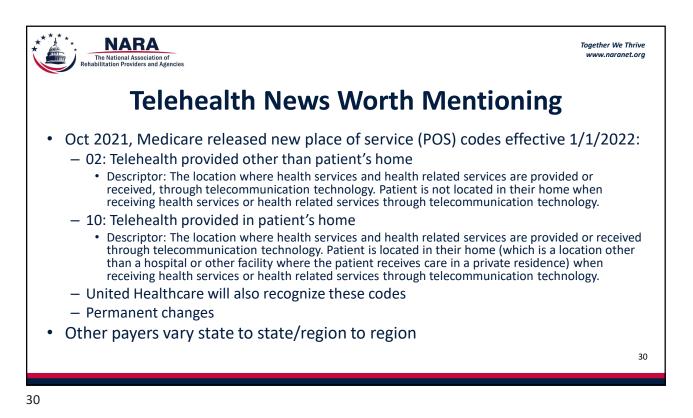


	HUMANA	UHC	AETNA	CIGNA
	92507, 92508, 92521- 92524, 92526, 92610, 96105, 97161-97168, 97110, 97112, 97116, 97129, 97130, 97150, 97530, 97535, 97542, 97550, 97755, 97760, 97761, 98966-98968, 98970-98972, G2250, G2251	92507, 92521-92524, 92526, 96105, 97129 (SLP only), 97130 (SLP only), 97161- 97168, 97110, 97112, 97116, 97530, 97535, 97750, 97755, 97760, 97761	92526 (commercial plans), 97161-97168, 97110, 97112, 97116, 97150, 97530, 97535, 97542, 97750, 97755, 97760,	92507, 92508, 92521- 92524, 97110, 97112, 97161-97168, 97530, 97755, 97760, 97761
Modifiers	Modifier 95	Modifier 95	Modifier 95 or GT	Modifier 95 or GT
Institutional Claim	Professional claim w/ POS that would have been reported face-to-face (e.g., POS 11). Also allowed on institutional claims.	Beginning 1/1/2021, professional claim w/ POS 02 indicating telehealth. Institutional claims for duration of PHE only.	For commercial plans, professional claim billed w/ POS 02. For Medicare, POS 02 or POS that would have been reported face-to-face. Also allowed on institutional claims.	Professional claim w/ POS that would have been reported face-to- face (e.g., POS 11). Institutional claims for duration of PHE only.
Timeframe	DOS 3/6/20 through duration of PHE only	Effective 1/1/2021	Effective 1/1/2021	Effective 1/1/2021

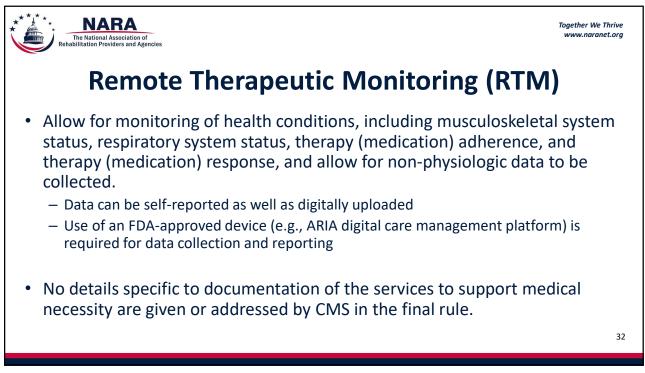


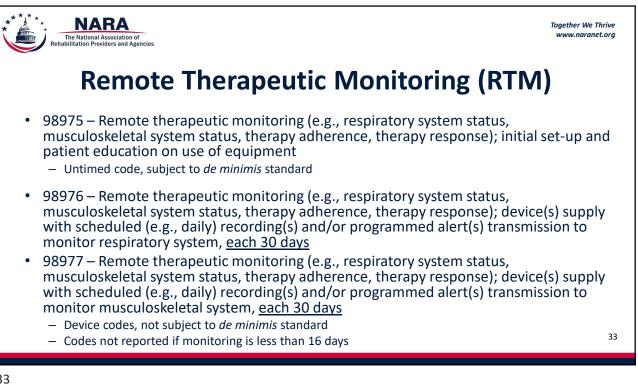
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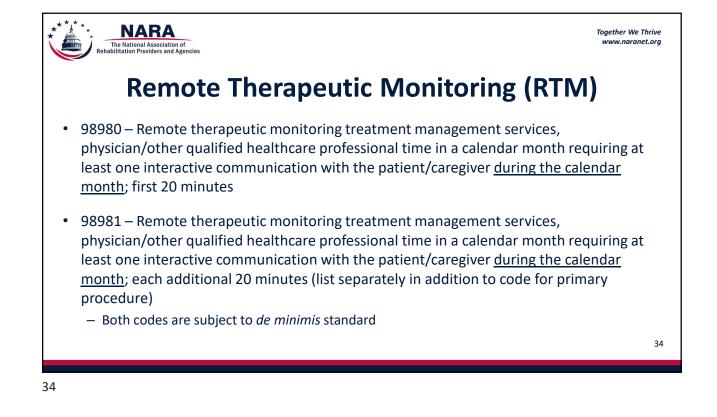


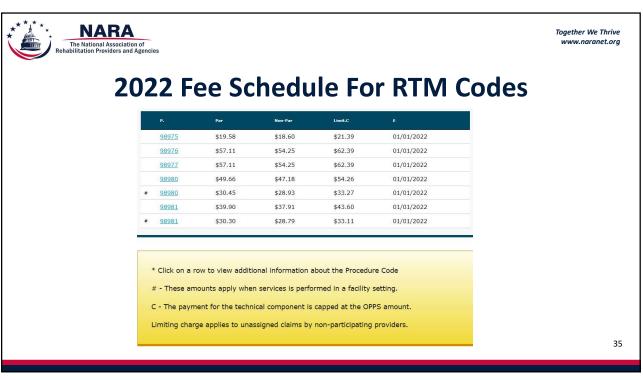


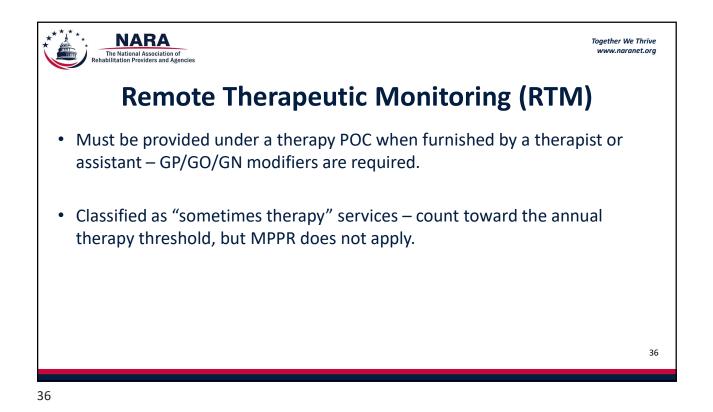


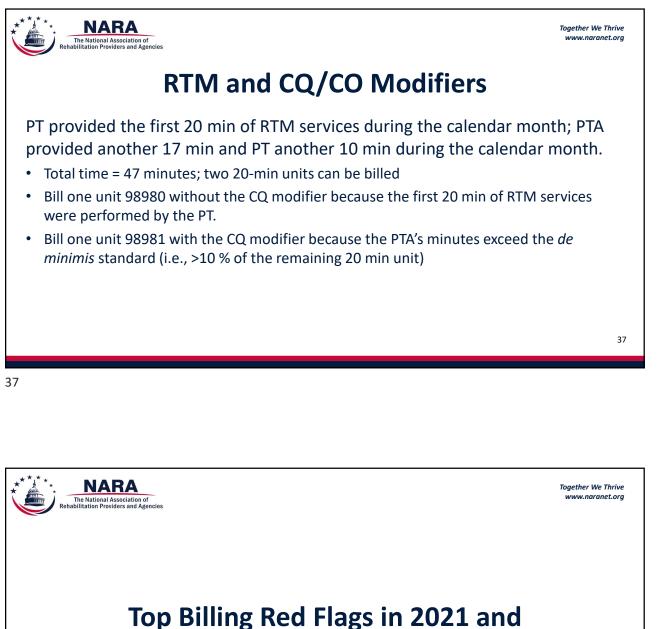






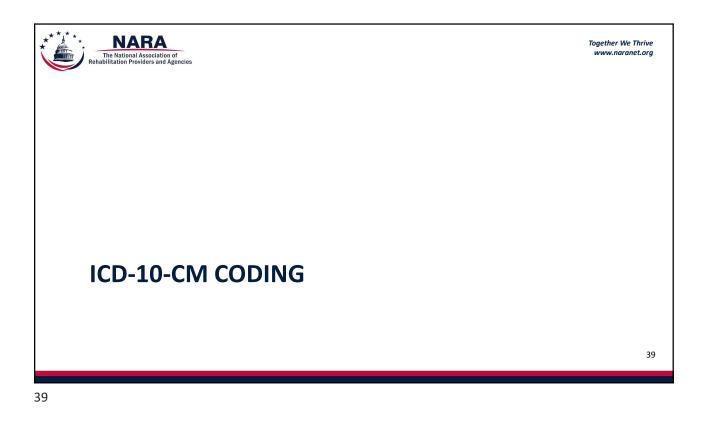


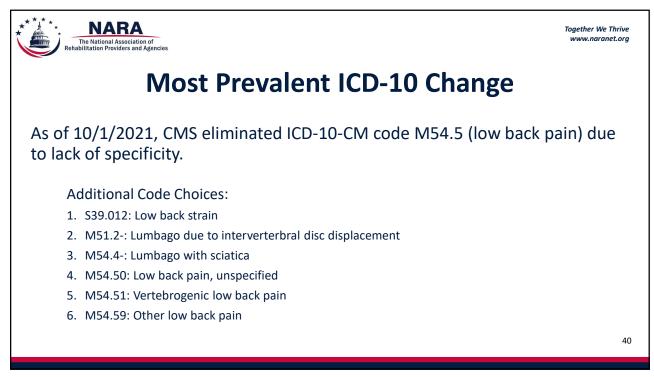


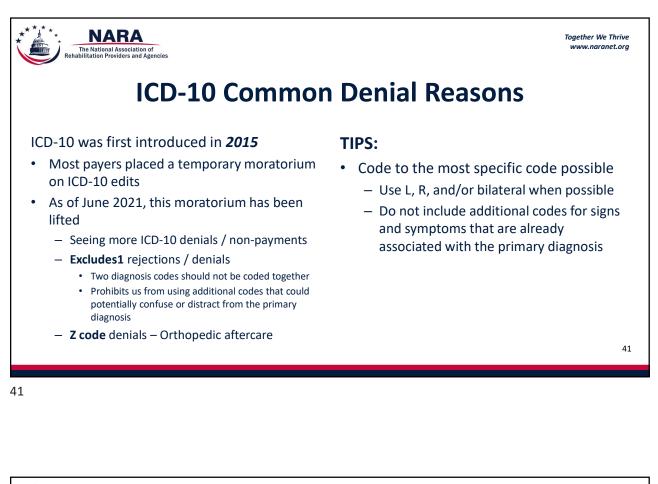


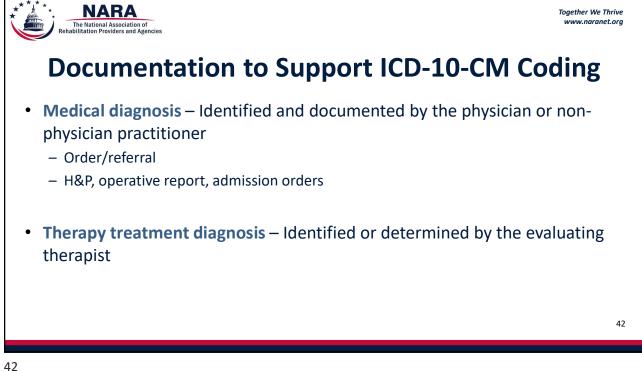
How to Avoid Them in 2022

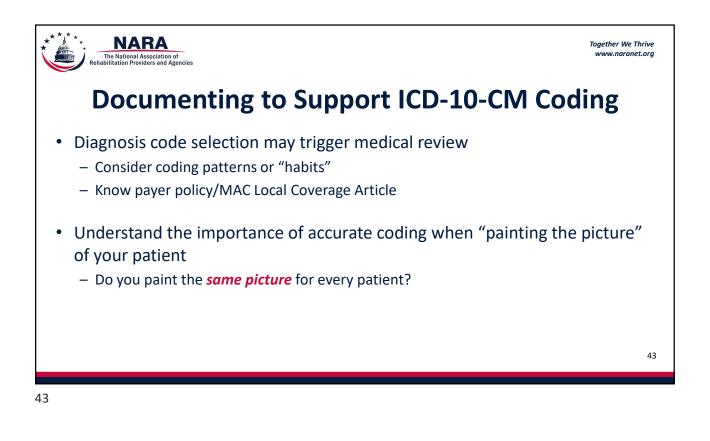


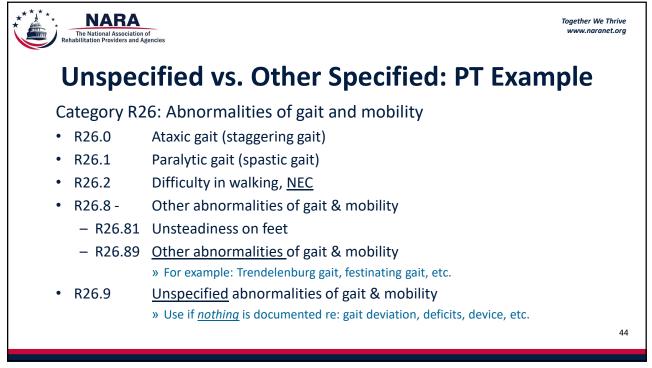


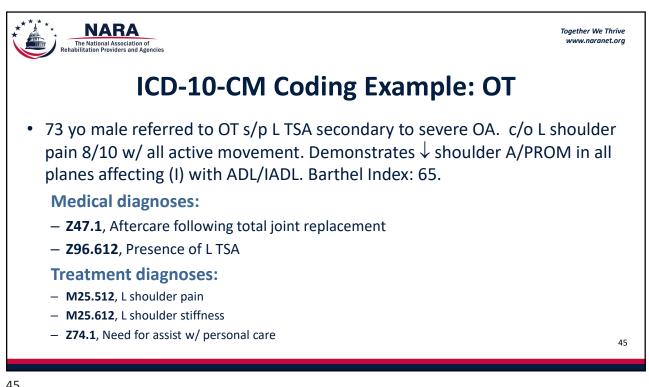


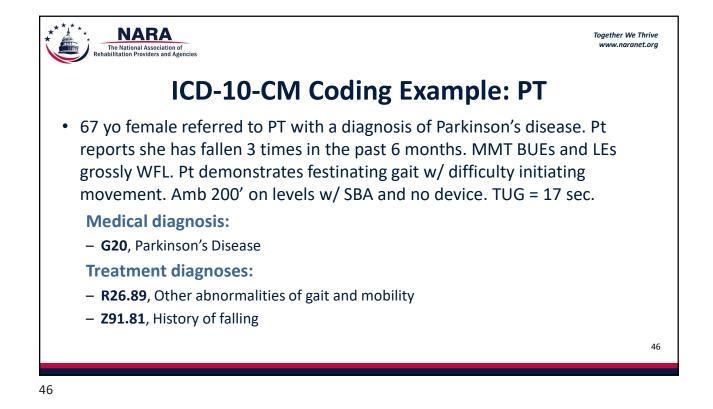


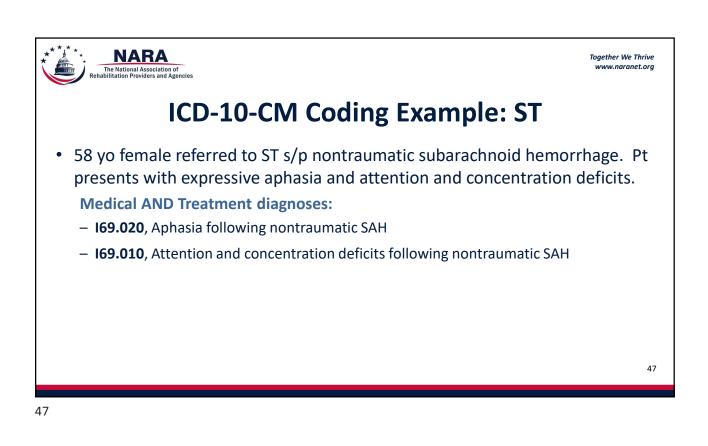




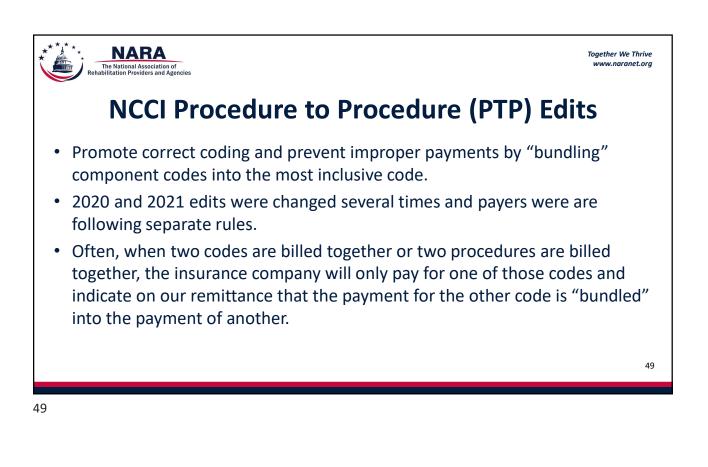


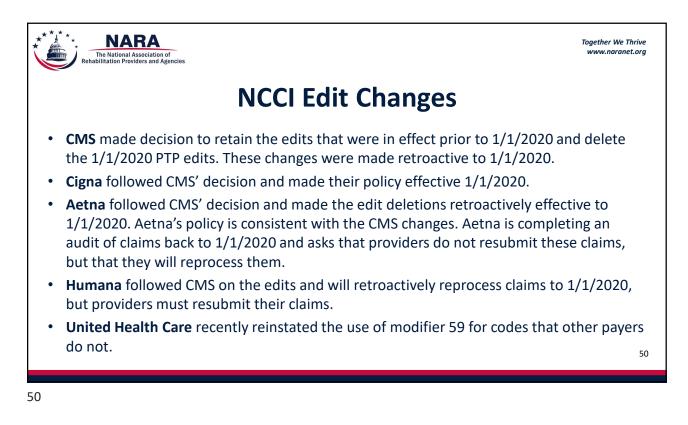










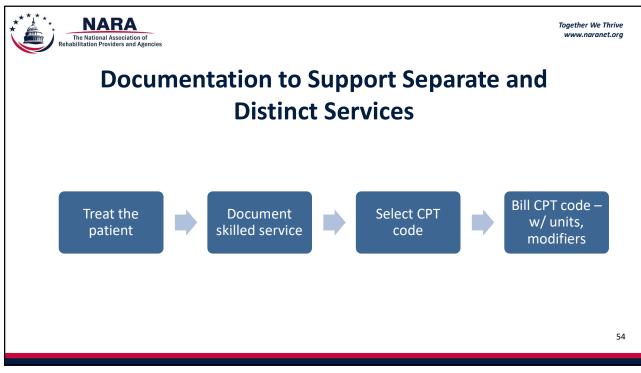


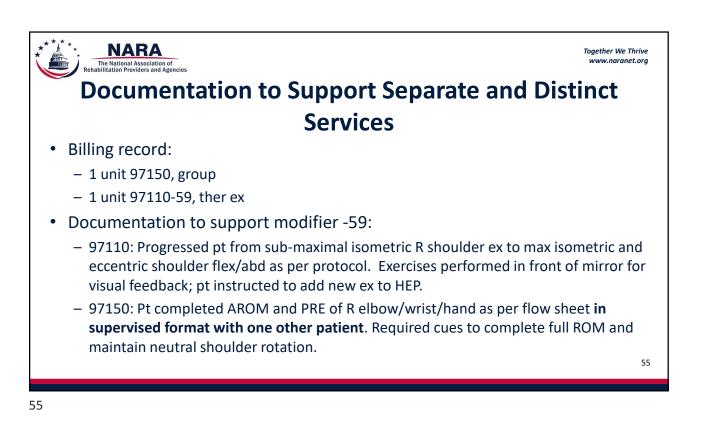
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	onal Associat	ion of					Together We Thriv www.naranet.or
Blue Pla	an						
SERV DATE	POS NOS		MODS D FROM P	BILLED REVIOUS PAGE	ALLOWED		
0415 041521		2 97530 59G	Р	119.90	88.14		
0415 041521		2 97140 GP		127.88	61.62		
0415 041521 36.74 CL		1 97110 GP	TOTALS	68.29 316.07	33.93 183.69		
Aetna							
0922 09222	1 1	1 97530	GP		49.00	13.00	
0922 09222		1 97112			45.00	16.75	
0922 09222		1 97110			42.00	8.38	
0922 09222		1 97140			45.00	21.03	
CMS							
1021 10212	1 11	1 97530	GP		49.00	37.92	
1021 10212		1 97112			45.00	26.09	
	1 11	1 97110	60		42.00	22.87	

The Natio	ARA nal Association of Providers and Agencie	95					Together W www.nard	
	Exai	mple	of Blu	e Plar	n Non-F	Paym	ent	
0913 0913	21 1	97530 GP		-49.00		0.00	0.00 <mark>CO-231</mark>	
0913 0913	21 1	97110 GP		-42.00	30.17	0.00	0.00	
0913 0913 -30.00		97140 GP 22 CLAIM	TOTALS	-45.00 -136.00	28.55 58.72	0.00 0.00	0.00 0.00	
0913 0913	21 1	97530 GP59)	49.00	32.26	0.00	0.00	
0913 0913	21 1	97110 GP		42.00	30.17	0.00	0.00	
0913 0913 30.00	21 1 CLM STATUS	97140 GP 1 CLAIM	TOTALS	45.00 136.00	22.87 85.30	0.00 0.00	0.00 0.00	
231 Mutually	exclusive	procedures	cannot be do	ne in the sar	ne day/setting			

	The National Assoc Rehabilitation Providers	iation of							Together V www.nai	
		Exa	mp	le of	Aetr	na No	n-Pay	yment		
REND PROV	SERV DATE	POS NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS GRP/RC	AMT	PROV
M: M15	1123 112321	1 9	7535 GO		94.04		0.00	0.00 PI-234	94.04	0.0
	1123 112321	1 9	7530 GO		59.95	36.25	0.00	7.25 CO-45	23.70	29.6
M: M15	1130 113021	1 9	7535 GO		47.02		0.00	0.00 PI-234	47.02	0.0
	1130 113021	1 9	7530 GO		59.95	36.25	0.00	7.25 CO-45	23.70	29.0
234 Th	is procedure	e is not	paid sep	parately						
										53







****	The National Asso Rehabilitation Provider	ciation of s and Agencies							Together V www.nai	
		Unatter	nded	Est	im No	on-Pa	yme	ent		
97	'014 vs. G	60283								
	Medicare requ Example of res	iires G0283 sponse on a claim	where inco	rrect co	ode is billed:					
REND	PROV SERV DATE	POS NOS PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC	AMT	PROV PD
	1105 110519	1 97012 GP		22.30	12.02	0.00	0.00	CO-59 CO-253 OA-23	12.67 0.09 4.92	4.62
REM: N17	1105 110519	97014 GP		21.59		0.00	0.00	CO-96	21.59	0.00
KEM: NI/	1105 110519	2 97530 GP		119.90	66.37	0.00	0.00	CO-59 CO-253 OA-23	68.14 0.51 26.47	24.78
PT RESP BILL TYF		STATUS 20 CLAIM TO ADJ TO TOTALS:	TALS INTEREST	163.79	78.39 0.00	0.00 LATE FILING	0.00 CHARGE	0.00	134.39 NET	29.40 29.40
<mark>96</mark>	Non-covered	charge(s)								
										57

