

E/M Services and Procedures
on the Same Day

Sometimes physicians will provide evaluation and management (E/M service) and perform a procedure at the same encounter or on the same day. The E/M service may or may not be related to the procedure. But either way, a modifier will need to be appended to the CPT code for the E/M service in order to avoid denial of payment and the need for an appeal. Physicians should be familiar with these modifiers and use them on the superbill so that billing staff can generate the claim correctly.

- **Modifier 25:** Significant, separately identifiable evaluation and management service by the same physician on the same day of the procedure or other service.
- **Modifier 57:** Decision for surgery.

Medicare rules specify that Modifier 57 should be used on an E/M code only in connection with procedures that have a 90-day global period, and only if the E/M service occurs the day of or the day prior to the procedure. Modifier 25 is used if the resulting procedure has a 0- or 10-day global period. Commercial payers may follow Medicare rules, or they may have their own reporting requirements.

Guidelines:

Report only the procedure code if the decision to perform the procedure was made at a previous encounter or if the E/M service was incidental and did not require a significant history, exam, and medical decision-making.

Report both an E/M service and a procedure code if the decision to perform the procedure resulted from an E/M service provided on the same day or if the E/M service and the procedure are for different diagnoses.

TIP

When reporting an E/M service and a procedure code on the same day, documentation of the E/M service should be separate and distinct from the procedure note.

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