Bilateral and Multiple Procedure Modifiers

Bilateral Procedures: Modifier -50

Even in the case of modifier -50, whose purpose and use is relatively obvious, the coder needs some expertise. Some five-digit codes describe bilateral procedures, even without a modifier. Before applying the -50 modifier, the coder has to check the procedure description to make sure that it doesn't already describe a procedure done to two mirror parts of the body.

Example

An example of a bilateral procedure is percutaneous needle biopsy of both lungs, which is coded 32405-50. The CMS likes to use -50 to eliminate a line of coding, so when submitting for Medicare reimbursement for a bilateral procedure, the coder puts in one five-digit code with the -50 modifier. Other third-party payers prefer to have two codes, one of which gets the -50 modifier to show that the physician performed two procedures at once.

Multiple Procedures: Modifier -51

It's important not to confuse modifier -50 and modifier -51, Multiple Procedures. Modifier -51 is for several surgeries done at the same time, on the same day. The first or main service is reported with its five-digit code, and other procedures done at the same time get the -51 modifier.

When using the multiple procedures modifier, be aware that some CPT codes include several procedures in a single code. Fortunately, there is a symbol to tell you when not to use -51. If you see a circle with a line through it, ◐, before the code, don't use -51, and read the description.
If one code does not describe all the procedures and there is no $\bullet$ symbol, -51 may be used in the following three situations:

1. Same operation, different site
2. Multiple operations, same operative session
3. One procedure performed multiple times in the same operation

The key to using this modifier is to put the most expensive procedure first, because Medicare reimburses 100% on the first procedure, but only 50% on the next four procedures. If there are more than five procedures, Medicare requires documentation.

**Example**

An example of the multiple procedures modifier in use for the same operation on different sites is cryotherapy, or freezing with liquid nitrogen, for acne on the back and face. The code for the procedure is 17340, so the coder would put 17340 and 17340-51.

Another example of when modifier -51 is used is for biopsy of the vestibule of the mouth. If there are two or more distinct lesions removed in the same session, this counts as one procedure performed multiple times in the same operation. The coder would put 40808 for the first lesion, and then 40808-51 for each succeeding lesion.

An example of multiple operations in the same operative session is when, during a preoperative visit for gallbladder surgery, the surgeon discovers that her patient also has an inguinal hernia. She performs both operations in the same operative session. The medical coder uses the codes for cholecystectomy 47600 and adds the Inguinal Hernia repair code with the Multiple Procedures modifier: 49505-51.