

# Report on Medicare Compliance Volume 30, Number 16. April 26, 2021

## Checklist: Auditing for the Compliant Use of Modifier 25

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This checklist can help providers audit for proper use of modifier 25. It was developed by Betsy Nicoletti, a consultant in Northampton, Massachusetts. Contact her at [betsy@betsynicoletti.com](mailto:betsy@betsynicoletti.com).

### Use of Modifier 25

To perform this audit, you will need:

- The medical record for each visit.
- Access to the patient account.

Select 10 patients who have had a procedure and an evaluation and management (E/M) service performed. Complete this form for each patient.

Modifier 25 is used to indicate that a procedure was performed on the same day as a significant, separately identifiable E/M service. Append the modifier to the E/M service. All services billed must be **medically necessary**. Whether or not to bill the E/M service with a modifier requires some judgment. This audit sheet will help you to assess these claims consistently and correctly.

Patient ID:

Practitioner ID:

Date of service:

Auditor ID:

Date of audit:

Bill an office visit with the procedure if you answer YES to the following six questions:

Is an office visit documented?

☐ Yes

☐ No

Is a procedure documented?

☐ Yes

☐ No

Does the procedure have a 0-10 day global period?

☐ Yes

☐ No

For the office visit:		
Is there a history documented?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
For a <i>new patient</i> , is a separate exam documented?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is there an assessment/plan noted in the chart?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Feel more confident if the answer to either of these two questions is YES:		
Was this the first time that the physician saw the patient for this problem?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is a second problem addressed during the office visit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Show caution about billing for both if the following is true:		
Is the procedure a repeat procedure?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do not bill if the answer to either of these questions is YES:		
Did the patient return to the office solely to have the procedure done because the physician did not have time to do the procedure on the day of the diagnosis?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Does the E/M portion of the note seem to be all recap of a previously taken history and plan?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Was the minor surgical procedure provided for an obvious, clear problem, such as treatment for warts or simple laceration repair?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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