

**THIS CA UPDATE HAS BEEN SENT TO THE FOLLOWING:****COUNTIES:**

- Imperial
- Riverside/San Bernardino
- Los Angeles
- Orange
- Sacramento
- San Diego

**LINES OF BUSINESS:**

- Molina Medi-Cal Managed Care
- Molina Medicare Options Plus
- Molina Marketplace (Covered CA)

**PROVIDER TYPES:**

- Medical Group/ IPA/MSO**
- Primary Care**
- IPA/MSO
- Directs
- Specialists**
- Directs
- IPA
- Hospitals**
- Ancillary**
- CBAS
- SNF/LTC
- DME
- Home Health
- Other

## Anatomical Surgical Procedure Modifier

This is an advisory notification to Molina Healthcare of California (MHC) network providers regarding the proper use of Current Procedural Terminology (CPT) and Healthcare Common Procedure Coding System (HCPCS) modifiers for bilateral procedures. Providers must correctly report the most comprehensive code that describes the service performed, including the most appropriate modifier when required.

Modifiers consist of two alphanumeric characters and are appended to HCPCS/CPT codes to provide additional information about the services rendered. Modifiers may be appended **only** if the clinical circumstances justify the use of the modifier(s). Bilateral and unilateral procedures require laterality modifiers for appropriate claim processing.

### Bilateral Modifiers

The National Correct Coding Initiative (NCCI) Procedure-to-Procedure (PTP) edits are code pair edits that prevent improper payment when certain codes are submitted together. A modifier indicator of "1" indicates that an NCCI PTP-associated modifier may be used to bypass an edit under appropriate circumstances. In general, these circumstances relate to separate patient encounters, separate anatomic sites, or separate specimens. Most edits involving paired organs or structures (e.g., eyes, ears, extremities, lungs, kidneys) have NCCI PTP modifier indicators of "1".

The existence of the NCCI PTP edit indicates that the 2 codes generally cannot be reported together unless the 2 corresponding procedures are performed at 2 separate patient encounters or 2 separate anatomic locations. However, if the 2 corresponding procedures are performed at the same patient encounter and in contiguous structures, in the same organ or anatomic region, NCCI PTP-associated modifiers generally should not be used.

### Reporting Guidelines

If the bilateral surgery indicator is "1," a bilateral surgical procedure must be reported with "1" unit of service and modifier 50 (bilateral modifier). Bilateral procedures may be reported as:

- "2" units of service on 1 claim line
- "1" unit of service and modifier 50 on 1 claim line
- "1" unit of service and modifier RT on 1 claim line plus "1" unit of service and modifier LT on a second claim line

The NCCI program requires that bilateral surgical procedures may be reported using modifier 50 with one unit of service unless the code descriptor defines the procedure as "bilateral." If the code descriptor defines the procedure as a "bilateral" procedure, it shall be reported with one unit of service without modifier 50.

If a bilateral surgical procedure is performed at different sites bilaterally, one unit of service may be reported for each site. That is, the HCPCS/CPT code may be reported with modifier 50 and one unit of service for each site at which it was performed bilaterally.

**Claims are subject to post-payment audits and may be reviewed to ensure the preceding items are accurate.**

For more information on bypass modifiers, refer to Molina Healthcare’s NCCI Bypass Modifiers Guide:

<https://www.molinahealthcare.com/~media/Molina/PublicWebsite/PDF/providers/wa/medicaid/com/ncci-bypass-modifiers.pdf>

For additional details on reporting and claims processing, please reference the resources below:

- Medicaid NCCI Manual: <https://www.medicaid.gov/medicaid/program-integrity/downloads/nccimanual2021-chapterone.pdf>
- Medi-Cal NCCI Manual: <https://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/correct.pdf>

**QUESTIONS**

If you have any questions regarding the notification, please contact your Molina Provider Services Representative. Please refer to the phone numbers listed below:

Service County Area	Provider Services Representative	Contact Number	Email Address
California Hospital Systems	Deletha Foster	909-577-4351	<a href="mailto:Deletha.Foster@molinahealthcare.com">Deletha.Foster@molinahealthcare.com</a>
	Shelly Lilly	858-614-1586	<a href="mailto:Michelle.Lilly@molinahealthcare.com">Michelle.Lilly@molinahealthcare.com</a>
Los Angeles	Clemente Arias	562-517-1014	<a href="mailto:Clemente.Arias@molinahealthcare.com">Clemente.Arias@molinahealthcare.com</a>
	Christian Diaz	562-549-3550	<a href="mailto:Christian.Diaz@molinahealthcare.com">Christian.Diaz@molinahealthcare.com</a>
Los Angeles / Orange County	Maria Guimoye	562-549-4390	<a href="mailto:Maria.Guimoye@molinahealthcare.com">Maria.Guimoye@molinahealthcare.com</a>
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*If you are not contracted with Molina and wish to opt out of the Just the Fax, email: [mhcproviderjustthefax@molinahealthcare.com](mailto:mhcproviderjustthefax@molinahealthcare.com)  
Please include provider name and fax number and you will be removed within 30 days.*