

How Providers Can Use Modifier 25 for Same-Day LARC Insertion Reimbursement

One of the biggest barriers to increasing access to long-acting reversible contraception (LARC) is that many providers are hesitant to offer LARC devices to patients on the same day of an unrelated office visit, even though same-day LARC insertion [improves](#) LARC uptake. Healthcare providers' offices often worry about the costs associated with LARC placement, and whether they'll be reimbursed for an expensive procedure and device that fall outside the appointment's initial scope.

Using [modifier 25](#) allows providers to receive separate reimbursement payment for same-day LARC insertion. According to the [E&M Coding Clear & Simple: Evaluation and Management Coding Worktext](#), modifier 25 is a Current Procedural Terminology (CPT) procedure code that allows providers to bill for a "significant, separately identifiable evaluation and management service by the same physician or other qualified health care professional on the same day of the procedure or other service." Modifier 25 can only be appended to an evaluation and management service code (i.e., to "modify" the first code), and allows a healthcare provider to receive appropriate reimbursement for all services offered during a clinical visit. As an example, under the evaluation and management CPT code 99213, a provider is reimbursed \$60.76. Using modifier 25 for same-day LARC placement provides reimbursement of an additional \$115.19.

Billing with modifier 25 for placing LARC on the same date as an evaluation and management service is acceptable when services are significant and separately identifiable, says Christy Lyle, nurse office director of clinical support services in the Mississippi Division of Medicaid. Payers generally accept the use of modifier 25 for same-day LARC insertion without supporting documentation, with one exception. Per Lyle, if a provider uses modifier 25 more frequently than their professional peers in their region, payers may request documentation that justifies billing for two services, such as medical records or lab tests.

To help bill for modifier 25 properly, Lyle recommends healthcare providers hire certified coders. "A certified coder who submits claims will know how to use modifier 25 and get the reimbursement," says Lyle. "That's the most significant thing providers can do to overcome challenges. It will definitely pay for itself in a provider's office over a short period of time."

For providers who are unable or unwilling to hire a certified coder, state and territorial health and Medicaid agencies can bridge the gap by facilitating relationships between their on-staff certified coders and healthcare providers. In a previous role at the Mississippi Medicaid division, Lyle met with all the OB/GYNs in the state, gave them her direct contact information, and encouraged them to reach out to her if they had any questions about coding. By building relationships with providers and raising their awareness of modifier 25, state and territorial health and Medicaid agencies can increase providers' appropriate use of modifier 25 and therefore, allow them to receive appropriate reimbursement for same-day LARC services.