

PROVIDER BULLETIN

PROVIDER INFORMATION



July 1, 2022

Update: Modifier -52, -CO and -CQ Reimbursement Changes – Effective July 1, 2022

Revision: Blue Cross is revising Provider Bulletin P25-22, published on 04/28/22, to exclude Medicare Advantage and Medicare Platinum Blue from the Modifier 52 reduction.

Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will be implementing changes related to modifier -52, -CO and -CQ reimbursement.

Modifier -52 Fee Schedule Reduction

Effective July 1, 2022, Blue Cross will begin reimbursing procedure codes billed with a -52 modifier at the lesser of 50% of the physician fee schedule allowance or charge submitted for the following lines of business:

- Commercial
- Federal Employee Program (FEP)

The Reimbursement Policy, General Coding – 003 Coding Edits will be updated to reflect this change.

Modifier -CO and -CQ Fee Schedule Reduction

Effective July 1, 2022, Blue Cross will be implementing a 15% reduction in the allowed amount for services modified with CO or CQ modifier for professional providers for commercial lines of business.

For Medicare lines of business, effective January 1, 2022, Blue Cross implemented a 15% reduction in the allowed amount for services modified with CO or CQ modifier for professional and facility providers to comply with requirements of the Centers for Medicare & Medicaid Services (CMS).

The Reimbursement Policy, Rehabilitative Services – 004 Physical, Occupational and Speech Therapy Modalities and Evaluation will be updated to reflect these changes.

Questions?

If you have questions, please contact provider services at **(651) 662-5200** or **1-800-262-0820**.