REIMBURSEMENT GUIDELINES:

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When the 25 or FT modifier is reported, the patient’s records must clearly document separately identifiable medical care was rendered.

**DEFINITIONS:**

<table>
<thead>
<tr>
<th>Modifier</th>
<th>Definition</th>
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<tbody>
<tr>
<td>25</td>
<td>Significant, separately identifiable E&amp;M service by the same physician or other qualified health care professional on the same day.</td>
</tr>
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<td>FT</td>
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**RELATED POLICIES:**

Refer to the following Commercial Medical Policies for additional information:

- S-52: Postoperative Services Following Definitive Surgery

Refer to the following Reimbursement Policies for additional information:

- RP-009: Modifiers 25, 59, XE, XP, XS, XU, FT
- RP-035: Correct Coding Guidelines

**POLICY UPDATE HISTORY INFORMATION:**

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<tr>
<td>1 / 2018</td>
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<td>Added modifier FT</td>
</tr>
<tr>
<td>6 / 2022</td>
<td>Removed S-52 Medical Policy Reference</td>
</tr>
<tr>
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<td>Administrative policy review with no changes in policy direction</td>
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Bulletin Number: RP-025  
Subject: Implantation of Subcutaneous Intravascular Catheter  
Effective Date: January 29, 2018  
End Date:  
Issue Date: January 29, 2018  
Source: Reimbursement Policy  
Applicable Commercial Market: PA ❋  WV ❋  DE ❋  
Applicable Medicare Advantage Market: PA ❋  WV ❋  
Applicable Claim Type: UB ❋  1500 ❋  

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This policy position applies to all commercial and/or Medicare Advantage lines of business as indicated above. Reimbursement policies are intended only to establish general guidelines for reimbursement under Highmark plans. Highmark retains the right to review and update its reimbursement policy guidelines at its sole discretion.
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