

Medical Billing Professionals Support Suite

News > General > Blue Cross Blue Shield of Florida Denying 97140 Codes

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2017-11-19 - Medical Billing Professionals - Comments (0) - General

For our chiropractic clients, BC BS of Florida has begun denying 97140 when billed with the 59 modifier saying:

- "Use of modifier 59 (crosswalks to 59), is not typical for procedure 97140. Check loop/segment 2400/SV101-2 Procedure Code; and 2400/SV101-3- SV101-6 Procedure Modifier."

This is clearly incorrect as CCI Edits do require the 59 modifier for 97140 when billed with codes such as 98940, 98941 and 98942 to indicate that the manual therapy (97140) was done to a different area than adjusted.

However, because they have this policy in place we will stop using the 59 modifier with the 97140 and we will resubmit any denied claims without the 59 modifier.

If the claims continue to deny, your office will have to contact BC BS to appeal OR try billing with a different code.

Thanks,

Steve