

Payment Policy

cmi_051733

Title	Modifier SG - Ambulatory Surgery Center (ASC) facility services				
Number	CP.PP.084.v3.3				
Last Approval Date	08/12/24	Original Effective Date	02/16/99		
Replaces	N/A				
Cross Reference	Multiple Surgical Reducti	ions			

Coverage of any service is determined by a member's eligibility, benefit limits for the service or services rendered and the application of the Plan's Medical Policy. Final payment is subject to the application of claims adjudication edits common to the industry and the **Plan's professional or facility services claims coding policies**. Reimbursement is restricted to the provider's scope of practice as well as the fee schedule applicable to that provider.

Purpose	To define when the Plan recognizes ambulatory surgery center (ASC) facility services and				
ruipose	claims that are submitted on a CMS 1500 paper claim or 837P electronic claim form.				
Scope	Applies to all Premera Blue Cross, Premera Blue Cross Blue Shield of Alaska, LifeWise Health Plan of Washington, LifeWise Assurance Company, and Premera Blue Cross HMO lines of business and products.				
Policy	The Plan recognizes ASC services when billed with the following modifier and place of service codes:				
	• Modifier SG – Ambulatory surgery center (ASC) facility service				
	 This is an informational modifier which is appended to any facility service rendered by an ASC to identify it as an ASC service 				
	 This modifier is appended to an ASC facility service only 				
	 This modifier is NOT billable on physician or other qualified healthcare professional services 				
	• Place of Service Code 24 – Ambulatory Surgery Center				
	 This Place of Service code is for the submission of any service rendered in an ASC. 				
	When multiple surgical procedures rendered in the ASC are billed for the same patient on the same date of service, multiple surgical reduction guidelines may be applied.				
	When billing for ASC facility services on a CMS 1500 paper claim form or an 837P electronic claim form, the ASC's National Provider Identifier (NPI) number should be entered as follows:				
	• CMS-1500 paper claim form: enter the ASC's NPI# into field 24J				
	837P electronic claim: enter the ASC's NPI# into loop 2310B or 2420A, NM109				
	If the ASC's NPI number cannot be entered into either of these fields, the fields should be left blank and NOT filled in with any NPI number.				
Violations of Policy	Violations of this policy by any party that enters into a written arrangement with the Plan may result in increased auditing and monitoring, performance guarantee contractual penalties and/or termination of the contract. Disciplinary actions will be appropriate to the seriousness of the violation and shall be determined at Plan's sole discretion.				
	Violations of this policy may be grounds for corrective action, up to and including termination of employment.				
Exceptions	None				

Laws,	None
Regulations &	
Standards	
References	Healthcare Common Procedure Coding System (HCPCS), Level II Procedure Codes

Policy Owner Review	Payment Integrity Oversight Committee			
Contact	Any questions regarding the contents of this policy or its application should be directed to			
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Annual Review	the Payment Integrity Department.			
Dates	08/12/24; 11/09/23; 02/08/23; 03/04/22; 04/16/21; 04/30/20; 05/24/19; 07/16/18;			
Dates	12/04/17; 12/12/16; 01/08/16; 01/11/15; 01/12/14; 01/13/13; 01/26/12; 01/27/11;			
	03/04/10; 05/11/09; 07/21/08; 06/09/07; 11/24/06; 08/29/05; 10/21/04; 10/11/04;			
	10/08/04; 11/03/0	3/04; 11/03/03; 08/13/02		
Version History	07/16/18	Title of Policy modified; Added clarification on what data elements		
		should be submitted to identify ASC facility Services		
	05/24/19	Annual review; no changes		
	04/30/20	Minor revision to the last paragraph in the Policy section to be more		
		reflective of the edit		
	04/16/21	Clarified the Purpose statement to indicate that the policy pertains to		
		Professional services billed on a CMS-1500 or 837P electronic claim		
		forms.		
	03/04/22	Clarified the correct use of the Place of Service code 24 and the		
		Modifier SG.		
	02/08/23	Changed the title of the policy from "Ambulatory Surgery Center		
		(ASC) Facility Services – Modifier SG and Place of Service Code 24"		
		to "Modifier SG – Ambulatory Surgery Center (ASC) Facility		
		Services". Moved the bullet for Modifier SG to the top and then bullet		
		for Place of Service code 24		
	11/09/23	Minor clarification to the opening paragraph. Added the last two		
		paragraphs in the Policy to identify how to enter the ASC's NPI		
		provider identification number on the claim record.		
	08/12/24	Annual review; no changes		