



NEW POLICY UPDATES

CLINICAL PAYMENT, CODING AND POLICY CHANGES

We regularly augment our clinical, payment and coding policy positions as part of our ongoing policy review processes. In an effort to keep our providers informed, please see the chart below highlighting upcoming new policies.

Effective for dates of service beginning November 1, 2026:

(New Jersey) Medicaid-Policy Guidelines

Provider Notification: Evaluation and Management (E&M) Service Billed with a Procedure Code that has a XXX-Day Global indicator on the CMS Fee Schedule

Provider Notification: Evaluation and Management Services with XXX-Day Global Procedure Code Policy. CMS identifies the XXX indicator on the fee schedule as meaning the global concept does not apply.

Over the past several years, Aetna Better Health of New Jersey has been implementing payment policies that reflect guidelines set forth by industry authorities. Our goal is to process claims consistently and in accordance with best practice standards. Beginning with claims processed on November 1, 2026, we will be instituting new payment policies for Evaluation and Management (E&M) services appended with modifier 25 or 27 is reported with an XXX-day global procedure code on the same day. The policies mirror those by Centers for Medicare & Medicaid Services (CMS).

The new policies will define guideline requirements for the following:

- Evaluation and Management Services: 92012-92014, 99211-99215, 99217-99223, 99231-99239, 99241-99245, 99251-99255, 99291, 99304-99310, 99315-99316, 99318 (Deleted 01/01/2023), 99347-99350, 99374-99375, or 99377-99378.

Based on the National Correct Coding Initiative Policy Manual and our policy, when an Evaluation and Management (E&M) service appended with modifier 25 or modifier 27 is reported on the same day as a global XXX procedure code, the E/M service is payable only if it is a significant and separately identifiable service.

Additionally, according to NCCI, "...XXX" procedures are performed by physicians and have inherent pre-procedure, intra-procedure, and post-procedure work usually performed each time the procedure is completed. This work shall not be reported as a separate E&M code. Other "XXX" procedures are not usually performed by a physician and have no physician work relative value units associated with them. A physician shall not report a separate E&M code with these procedures for the supervision of others performing the procedure or for the interpretation of the procedure. With most "XXX" procedures, the physician may, however, perform a significant and separately identifiable E&M service that is above and beyond usual pre- and post-operative work of the procedure on the same date of service which may be reported by appending modifier 25 to the E&M code. This E&M service may be related to the same diagnosis necessitating performance of the "XXX" procedure but cannot include any work inherent in the "XXX" procedure, supervision of others performing the "XXX" procedure, or time for interpreting the result of the "XXX" procedure. Appending modifier 25 to a significant, separately identifiable E&M service when performed on the same date of service as an "XXX" procedure may be appropriate in some instances.

Modifier 25 may be appended to E&M services reported with minor surgical procedures (with global periods of 000 or 010 days) or procedures not covered by Global Surgery Rules (with a global indicator of XXX). Since minor surgical procedures and XXX procedures include pre-procedure, intra-procedure, and post procedure work inherent in the procedure, the provider shall not report an E&M service for this work. Furthermore, Medicare Global Surgery Rules prevent the reporting of a separate E&M service for the work associated with the decision to perform a minor surgical procedure regardless of whether the patient is a new or established patient.”

This policy identifies situations in which an Evaluation and Management (E&M) service appended with modifier 25 or 27 is reported with a procedure that has a global indicator of XXX on the same day.

Reference Information

National Correct Coding Initiative (NCCI)