

How to add a GY modifier when there is a telemedicine modifier (Revised)

If your client has Medicare primary, a GY modifier is required to bypass billing Medicare primary so that the claim can be directly submitted to the secondary.

You will need to add the GY modifier when you invoice the visit in Billing. But, due to the telemedicine modifier, it needs to be done a little differently.

1. You will NOT enter the GY in the boxes BEFORE you “apply to invoice.” Leave the boxes EMPTY.

Un-Invoiced Treatments Diag. Code: Apply to Invoice
 Rate/Unit: \$ Proc. Code Modifier:

2. After you “apply to invoice” you will see that the (95) modifier will populate.

Visit#	Treat#	Treat. Date	Therapist	Type	Proc.	Modifier	Diag1	Diag2	Diag3	Diag4	Dur.	Units	Rate/Unit	Charge	W/O	Pat. Resp.	Insurance	Pat. Paid	Ins. Paid
310582	314634	5/22/2020	Holdredge PsyD LMFT, J	MH	90791	95					60 min.	1	\$200.00	\$200.00	\$0.00	\$20.00	\$180.00	\$0.00	\$0.00
														Totals:	\$0.00	\$20.00	\$180.00	\$0.00	\$0.00

3. Click the “Edit” button and then add the GY modifier in the second modifier box.

Visit#	Treat#	Treat. Date	Therapist	Type	Proc.	Modifier	Diag1	Diag2	Diag3	Diag4	Dur.	Units	Rate/Unit	Charge	W/O	Pat. Resp.	Insurance	Pat. Paid	Ins. Paid
310582	314634	5/22/2020	Holdredge PsyD LMFT, J	MH	90791	95					60 min.	1	\$200.00	\$200.00	\$0.00	\$20.00	\$180.00	\$0.00	\$0.00
														Totals:	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

4. Then click “Save” and it should look like this (with 95 and GY) as the modifiers:

Visit#	Treat#	Treat. Date	Therapist	Type	Proc.	Modifier	Diag1	Diag2	Diag3	Diag4	Dur.	Units	Rate/Unit	Charge	W/O	Pat. Resp.	Insurance	Pat. Paid	Ins. Paid
310569	314614	5/25/2020	Holdredge PsyD LMFT, J	MH	90791	95 GY					60 min.	1	\$						

Note: Medica, United & HealthPartners use location code 02 for teletherapy and NO modifier, so don't be alarmed when you see no 95 modifier when you click to apply to invoice.