



# Two Services: Can We Submit Both?

That answer is found in  
the NCCI Policy Manual  
and/or the NCCI  
PTP Edits.

BY JEFFREY LEHRMAN, DPM

**A** provider performs two different services. Each service has its own CPT<sup>®</sup>1 code. May both CPT codes be submitted?

## National Correct Coding Initiative Policy Manual

Direction regarding coding for multiple procedures performed at the same encounter is provided by the National Correct Coding Initiative (NCCI).<sup>2</sup> The NCCI provides direction when coding for services performed for Medicare Part B beneficiaries. Many non-Medicare payers follow the same guidance provided by the NCCI. Chapter I, Section A of the NCCI Policy Manual states, “a physician shall not report multiple HCPCS/CPT codes when a single comprehensive HCPCS/CPT code describes these services.”<sup>3</sup> Therefore, reporting multiple CPT codes when a single CPT describes the services performed is not allowed.

A good example of this is performing a first metatarsocuneiform joint fusion with concomitant remov-

al of the distal medial eminence of the first metatarsal head for hallux valgus correction. The appropriate code for this is:

CPT<sup>®</sup> 28297—Correction, hallux valgus with bunionectomy, with sesamoidectomy, when performed; with first metatarsal and medial cuneiform joint arthrodesis, any method.<sup>1</sup>

Based on the guidance in Chapter I, Section A of the NCCI Policy

## National Correct Coding Initiative Procedure-to-Procedure Edits

In addition to the guidance provided in the NCCI Policy Manual, the NCCI publishes procedure-to-procedure (PTP) edits.<sup>4</sup> These edits are usually based upon the standards of medical/surgical practice.<sup>5</sup> Two services performed at the same site are paired by an NCCI PTP edit when one of those services is considered to be an inte-

---

**Inappropriately reporting multiple CPT codes when there is a single CPT code that describes all services performed is often referred to as “unbundling.”**

---

Manual, separating this into multiple codes is inappropriate because there is a single CPT code that describes all services performed. Inappropriately reporting multiple CPT codes when there is a single CPT code that describes all services performed is often referred to as “unbundling.”

gral component of the other. In general, when two services are provided at the same encounter whose CPT codes are paired by a NCCI PTP edit, both CPT<sup>®</sup> codes should not be reported unless it is clinically appropriate to use an NCCI PTP-associated modifier. When refer-

*Continued on page 34*

## Two Services (from page 33)

ring to two procedures that are paired by the NCCI PTP edits, the modifier options are typically -59 Modifier<sup>1</sup> or X[ESPU] Modifiers. The -59 Modifier indicates the two procedures were distinct/independent from each other. Typ-

-59 Modifier<sup>1</sup> or X[ESPU] modifiers. When two codes are paired, the edits indicate which code should be submitted when both services are performed, and it is not appropriate to use an NCCI PTP-associated modifier by the order of the pairing. When two codes are paired, and it is not appro-

11042 in Column 2. In this example, it is not appropriate to use an NCCI PTP-associated modifier because the services were performed at the same site and do not warrant use of the -59 Modifier<sup>1</sup> or X[ESPU] modifiers. Because CPT 15275 is in Column 1 of the pairing and CPT 11042 is in Column 2 of the pairing and no NCCI PTP-associated modifier is appropriate, only CPT 15275 is submitted for this example.

**These edits are updated every business quarter, so providers should ensure they are using the edits that were effective on the date of service.**

ically, this involves the two procedures being performed at different sites.

### Access the NCCI PTP Edits

The NCCI PTP Edits are free and published online here: <https://www.cms.gov/medicare/coding-billing/national-correct-coding-initiative-ncci-edits/medicare-ncci-procedure-procedure-ptp-edits>

These edits are updated every business quarter, so providers should ensure they are using the edits that were effective on the date of service. When following the link above, there are both Hospital PTP Edits and Practitioner PTP Edits listed. When coding for practitioner services, the Practitioner PTP Edits should be used, regardless of the place of service. There are four different links listed under the Practitioner PTP Edits. There are over two million edits, so they need to be separated into four different files. The link that includes the range of the code combination being searched should be accessed.

### Interpreting the NCCI PTP Edits

Once an edit file is accessed, users see a list of codes in Column A and a list of codes in Column B. When two codes are next to each other in Column A and Column B of an NCCI edits file, they are “paired” by the edits. Column F lists the pairing modifier. A pairing modifier of zero means this code combination may never be submitted under any circumstance. A pairing modifier of one means the two codes may both be submitted only when it is appropriate to use an NCCI PTP-associated modifier, such as the

priate to use an NCCI PTP-associated modifier, the Column 2 code of the pairing is considered to be an integral component of the Column 1 code of the pairing. Therefore, if both services are performed and it is not appropriate to use an NCCI PTP-associated modifier, only the Column 1 code of the pairing should be submitted.

### Example

Debridement of a 2cm X 3cm foot ulcer to the depth of subcutaneous

tissue and skin substitute application to the same ulcer are both performed at the same session. May the codes for both services be submitted? The answer is found in the NCCI PTP edits.

CPT 11042—Debridement, subcutaneous tissue (includes epidermis and dermis, if performed); first 20 sq. cm or less<sup>1</sup>

CPT 15275—Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area up to 100 sq. cm; first 25 sq. cm or less wound surface area.<sup>1</sup>

Accessing the NCCI PTP Edits using the guidance shared above reveals that CPT 11042 and CPT 15275 are paired with CPT 15275 in Column 1 and CPT

### Conclusion

In most instances, guidance regarding whether two codes may be submitted when two services are performed at the same encounter is found in the NCCI Policy Manual and/or the NCCI PTP Edits. **PM**

### References

<sup>1</sup> Current Procedural Terminology (CPT®) is copyright 1966, 1970, 1973, 1977, 1981, 1983-2023 by the American Medical Association. All rights reserved. CPT is a registered trademark of the American Medical Association (AMA). CPT codes and their descriptions do not reflect or guarantee coverage or payment.

<sup>2</sup> <https://www.cms.gov/national-correct-coding-initiative-ncci>

**In most instances, guidance regarding whether two codes may be submitted when two services are performed at the same encounter is found in the NCCI Policy Manual and/or the NCCI PTP Edits.**

<sup>3</sup> <https://www.cms.gov/files/document/medicaid-ncci-policy-manual-2024-chapter-1.pdf>

<sup>4</sup> <https://www.cms.gov/medicare/coding-billing/national-correct-coding-initiative-ncci-edits/medicare-ncci-procedure-procedure-ptp-edits>

<sup>5</sup> Chapter I, General Correct Coding Policies for National Correct Coding Initiative Policy Manual for Medicare Services.



**Dr. Lehrman** is a Certified Professional Coder, Certified Professional Medical Auditor, and operates Lehrman Consulting, LLC, which provides guidance regarding coding, compliance, and documentation. Follow him on Twitter @DrLehrman.