



**CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR MEDICAID SERVICES**

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PROVIDER LETTER

TO: Ambulatory Surgical Centers (PT 36 / PL #A-31)

DATE: May 23, 2024

RE: Removal of Modifier 50

Effective April 1, 2024, to align with Medicare, Kentucky Medicaid began removing modifier 50 when billing for multiple surgical procedures performed on the same date of service.

When more than one covered procedure is performed in a single operative session, reimbursement for facility services will be 100 percent of the surgical group rate for the primary procedure and 50 percent of the surgical group rate for the secondary procedure.

If you have any questions concerning these changes, feel free to contact the Division of Health Care Policy at DivisionofHealthCarePolicy@ky.gov.

Sincerely,

Justin Dearing

Justin Dearing, Director
Division of Health Care Policy
Department for Medicaid Services

JD/kl