

## **MODIFIERS used for Mammography Services**

A radiologist who interprets a screening mammography is allowed to order and interpret additional films based on the results of the screening mammogram while the beneficiary is still at the facility for the screening exam. Where a radiologist interpretation results in additional films, the mammography is no longer considered a screening exam for application of age and frequency standards or for payment purposes. This can be done without an additional order from the treating physician.

### **For claims with Dates of Service On and after January 1, 2002:**

**“GG”** - “Performance and payment of a screening mammography and diagnostic mammography on same patient same day” - This is billed with the Diagnostic Mammography code to show the test changed from a screening test to a diagnostic test. Contractors will pay both the screening and diagnostic mammography tests. This modifier is for tracking purposes only.

### **For claims with Dates of Service October 1, 1998 through Dec 31, 2001:**

**“GH”** - “Diagnostic mammogram converted from screening mammogram on same day.” Statistics will be collected based on the presence of modifier “-GH.” The claim will be billed and paid as a diagnostic mammography instead of a screening mammography. However, since the original intent for the exam was for screening, for statistical purposes, the claim is considered a screening.