
-55 Post-Operative Management Only Modifier

Last Reviewed: 3/22/2024

Surgical services include pre-operative, intraoperative and postoperative care. When a physician or other qualified health care professional appends the -55 modifier to a surgical procedure it indicates only the post-operative services associated with the global surgical package was performed by the by the physician or other qualified health care professional. The remainder of the care was relinquished to another provider(s).

When different providers in a group practice participate in the care of the patient the global package should be billed. The physician who performs the surgery should be listed as the performing physician.

Product Information

The information outlined below applies to all Aspirus Medicare Advantage products.

Payment Information

Payment for eligible services will be based on the post-operative percentage as defined by Medicare. Detailed information is available in the Medicare Claims Manual (See link below).

Appropriate Use

- The surgeon performs only the post-operative care, and the surgical procedure and pre-operative care was furnished by a provider from another group practice.
- The -55 modifier should be appended to surgical procedure codes only.
- The surgery performed has a 90 or 10 day global period.

Inappropriate Use

- The -55 modifier is appended to any service other than a surgical procedure with a global period of 90 or 10 days.
- Care during the global period was furnished by multiple providers in the same group practice.

Additional Links

[CMS Medicare Physician Fee Schedule Relative Value File \(MPFSRVF\)](#)

[Medicare Claims Processing Manual, Chapter 12, Section 40.4 Adjudication of Claims for Global Surgeries](#)

Disclaimer

The disclaimer published on the modifier table applies to the modifier table and all of Aspirus' published attachments including this document.

**CPT[®] is a registered trademark of the American Medical Association*