

COVID-19 FAQ

23. When should I use the “CS” modifier on an ambulance claim?

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Answer: Based on current information provided by CMS, the “CS” modifier does not appear to apply to ambulance claims. The CS modifier is used to notify Medicare to make 100% of the fee schedule payment for services directly related to COVID-19 testing. In other words, Medicare pays the entire fee schedule (allowed) amount, and the patient has no obligation for the 20% co-payment. Current CMS guidance suggests that this is limited to COVID-19 related testing services only.

CMS guidance on this modifier is found in MLN articles, listed below:

[MLN Connects 04/07/2020](#)

[MLN Matters 04/10/2020](#)

This guidance states that for the cost sharing waiver to apply, the service being billed would have to be for a “medical visit” that is coded using a code from one of the 7 listed categories of “evaluation and management codes” used to describe physician-patient encounters.

While an ambulance might transport a patient to have a test performed, the ambulance service does not bill for the transport using an E/M code from one of the seven stated categories of E/M codes. This CS modifier appears warranted for testing-specific orders and services.

Therefore, the CS modifier is not one that globally applies to all cases related to COVID-19. Instead, there are specific circumstances and cases in which the CS is supposed to be used. By means of comparison, simply adding the GW Modifier to all claims for any Hospice patient is not correct. Instead, certain requirements must be met for properly using the GW modifier (i.e., the service must be unrelated to the terminal illness). Both CS and GW work to override an edit that might normally require some other action. Thus, simply adding a modifier that causes the Medicare claims adjudication system to bypass edits could be considered a false claim.

Based on the plain language of this guidance, ambulance claims do not satisfy the criteria outlined in the CMS guidance for use of the CS Modifier. Therefore, based on current guidance, we have no reason to believe the CS Modifier should be used on ambulance claims. Of course, all things related to COVID-19 are very fluid, and guidance is changing rapidly. Stay tuned for any additional insight in case CMS issues any more clarity regarding this CS modifier.