



Texas Medicaid: Bill with modifier 59 when services are on the same day

To avoid claim denials and recoupments, the appropriate procedure code should be submitted with modifier 59 to identify services that are distinct when performed for the same member on the same day. Claims submitted without modifier 59 may appear as duplicates and then be denied or recouped.

When to apply modifier 59

View the [quick reference guide](#) from CMS to see when you use modifier 59.

Resources

- [Claims, billing and payments](#)
- [Modifier Reference Policy, Professional](#)

Questions? We're here to help.

If you need additional help, please call Provider Services at **888-887-9003**, Monday–Friday, 8 a.m.–6 p.m., or for chat options and contact information, visit UHCprovider.com/contactus.