

# Modifiers FX and FY - Radiology Reductions for Technology Type

Last Updated: 5/14/2025 Last Reviewed: 5/14/2025 Originally Effective: 7/1/2018

Last update includes payment policy changes, subject to 28 TAC §3.3703(a)(20)(D)? No

If yes, Texas Last Update Effective Date: n/a Policy #: RPM059

# Scope

Companies: Moda Partners, Inc. and its subsidiaries & affiliates (All)

Provider Contract Status: Any
Claim Forms: CMS1500 & CMS1450 (paper and electronic versions)

Claim Dates: All

# **Reimbursement Guidelines**

#### A. General

We follow CMS in applying reductions for type of technology used in radiology services.

As required by CMS, we ensure that reimbursement for Medicare Advantage claims to out-of-network providers accepting Medicare is at least as good as Original Medicare reimbursement.

#### B. Modifier FX

Modifier FX designates X-ray imaging services that are taken using traditional x-ray film rather than digital radiography. Claims for X-rays using film are to include modifier FX.

- 1. Facility claims submitted on CMS1450/UB claim forms are billing for the technical component of the radiology service. When modifier FX is submitted:<sup>8</sup>
  - a. For dates of service January 1, 2017 through December 31, 2017, reimbursement will be at 80% of the allowable amount (20% reduction).
  - b. For dates of service January 1, 2018 through December 31, 2022, reimbursement will be at 93% of the allowable amount (7% reduction).
  - c. For dates of service January 1, 2023 and following, reimbursement will be at 90% of the allowable amount (10% reduction).
- 2. For professional claims submitted on CMS1500 claim forms, and all dates of service:<sup>2</sup>
  - a. When modifier FX is submitted with modifier TC (technical component), reimbursement will be at 80% of the TC allowable amount (20% reduction of technical component).
  - b. When modifier FX is submitted for a global service, reimbursement will be at 86% of the global service allowable.

### C. Modifier FY

Modifier FY designates imaging services that are X-rays taken using computed radiography (including the X-ray component of a packaged service).<sup>3</sup> Claims submitted by a provider, supplier, or hospital outpatient department for imaging services using this technology, are to indicate this by appending modifier FY to the line item(s) for the applicable service(s).

- 1. Radiology procedure codes submitted on CMS1450/UB claim forms with any revenue code(s) other than 096x 098x are billing for the technical component of the radiology service. When modifier FY is submitted:<sup>9</sup>
  - a. For dates of service January 1, 2017 through December 31, 2017, reimbursement will be at 80% of the allowable amount (20% reduction).
  - b. For dates of service January 1, 2018 through December 31, 2022, reimbursement will be at 93% of the allowable amount (7% reduction).
  - c. For dates of service January 1, 2023 and following, reimbursement will be at 90% of the allowable amount (10% reduction).

- 2. For professional claims submitted on CMS1500 claim forms, and all dates of service: 3, 4, 7
  - a. For dates of service January 1, 2017 through December 31, 2017, reimbursement will be:
    - i. When modifier FY is submitted with modifier TC (technical component), reimbursement will be at 80% of the TC allowable amount (20% reduction of technical component).
    - ii. When modifier FY is submitted for a global service, reimbursement will be at 86% of the global service allowable (20% reduction of technical component portion of global).
  - b. For dates of service January 1, 2018 through December 31, 2022, reimbursement will be:
    - i. When modifier FY is submitted with modifier TC (technical component), reimbursement will be at 93% of the TC allowable amount (7% reduction of technical component).
    - ii. When modifier FY is submitted for a global service, reimbursement will be at 5% of the global service allowable (7% reduction of technical component portion of global).
  - c. For dates of service January 1, 2023 and following, reimbursement will be:
    - When modifier FY is submitted with modifier TC (technical component), reimbursement will be at 90% of the TC allowable amount (10% reduction of technical component).
    - ii. When modifier FY is submitted for a global service, reimbursement will be at 7% of the global service allowable (10% reduction of technical component portion of global).

### D. Multiple X-Ray Modifiers On The Same Line

- 1. When multiple X-ray pricing/reduction modifiers are reported on the same line, both pricing adjustments are applied.<sup>4</sup>
- 2. The FY modifier reduction will be applied after the other reduction. For example, lines billed with both FX and FY modifier will have the FX modifier reduction applied first, and then the FY reduction is applied.

# **Definitions**

### **Acronyms/Abbreviations**

Acronym	Definition
CMS	Centers for Medicare and Medicaid Services
RPM	Reimbursement Policy Manual (e.g., in context of "RPM052" policy number, etc.)
TC	Technical Component
UB	Uniform Bill

#### **Definition of Terms**

Term	Definition
Computed radiography	Cassette-based imaging which utilizes an imaging plate to create the image
technology	involved. <sup>3</sup>

#### **Modifier Definitions**

Modifier	Modifier Description & Definition
Modifier FX	X-ray taken using film
Modifier FY	X-ray taken using computed radiography technology/cassette-based imaging

### **Related Policies**

A. "Moda Health Reimbursement Policy Overview." Moda Health Reimbursement Policy Manual, RPM001.

### **Resources**

- CMS. "Payment Reduction for X-Rays Taken Using Film." CMS Transmittal 3583/CR9727. August 12, 2016; Last accessed January 6, 2023. <a href="https://www.cms.gov/Regulations-and-guidance/Guidance/Transmittals/Downloads/R3583CP.pdf">https://www.cms.gov/Regulations-and-guidance/Guidance/Transmittals/Downloads/R3583CP.pdf</a>.
- 2. CMS. "Payment Reduction for X-Rays Taken Using Film." MedLearn Matters MM9727. January 1, 2017; Last accessed January 6, 2023. <a href="https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM9727.pdf">https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM9727.pdf</a>.
- 3. CMS. "Payment Reduction for X-Rays Taken Using Computed Radiography." CMS Transmittal 3820. Original publication July 28, 2017. Re-communicated November 21, 2017. Last accessed January 6, 2023. Page 3, § I.B; Pages 3-5, § II, # 10188.1 10188.6. <a href="https://www.cms.gov/Regulations-and-Guidance/Transmittals/2017Downloads/R3820CP.pdf">https://www.cms.gov/Regulations-and-Guidance/Transmittals/2017Downloads/R3820CP.pdf</a>.
- 4. CMS. "Payment Reduction for X-Rays Taken Using Computed Radiography." MedLearn Matters MM10188. January 1, 2018. <a href="https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM10188.pdf">https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM10188.pdf</a> .
- 5. CMS. *Medicare Claims Processing Manual* (Pub. 100-4). Chapter 13 Radiology Services and Other Diagnostic Procedures, § 20.2.4.
- 6. CMS. *Medicare Claims Processing Manual* (Pub. 100-4). Chapter 13 Radiology Services and Other Diagnostic Procedures, § 20.2.5.
- 7. CMS. *Medicare Claims Processing Manual* (Pub. 100-4). Chapter 13 Radiology Services and Other Diagnostic Procedures, § 20.2.6.
- 8. CMS. *Medicare Claims Processing Manual* (Pub. 100-4). Chapter 4 Part B Hospital (Including Inpatient Hospital Part B and OPPS), § 20.6.14.
- 9. CMS. *Medicare Claims Processing Manual* (Pub. 100-4). Chapter 4 Part B Hospital (Including Inpatient Hospital Part B and OPPS), § 20.6.15.

# **Policy History**

Reminder: The most current version of our reimbursement policies can be found on our provider website. If you are using a printed or saved electronic version of this policy, please verify the current information by going to: <a href="https://www.modahealth.com/medical/policies reimburse.shtml">https://www.modahealth.com/medical/policies reimburse.shtml</a>

Date	Summary of Update
5/14/2025	Clarified revenue code range/exclusions for radiology technical component on facility claims.
	Acronyms & Related Policies updated. Formatting updates. No policy changes.
5/8/2024	Last Reviewed date updated. No policy or content changes.
1/11/2023	Updated payment discount amounts based on claim type and date of service to be consistent
	with CMS policy documentation. Footnotes included. Resources updated.
12/14/2022	Idaho added to Scope.
6/8/2022	Policy History section: Added. Entries prior to 2022 omitted (in archive storage).
	Acronyms updated. Formatting updates. No policy changes.
8/17/2018	Policy document initially approved by the Reimbursement Administrative Policy Review
	Committee & initial publication.
7/1/2018	Original Effective Date (with or without formal documentation). Policy based on CMS policy for
	modifiers FX and FY as a part of our efforts to more closely align and standardize our processing
	with CMS policy. Due to system limitations policy is effective by processing date and will affect
	previous dates of service when processed on or after 7/1/2018.