



**CABINET FOR HEALTH AND FAMILY SERVICES  
DEPARTMENT FOR MEDICAID SERVICES**

Division of Health Care Policy  
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**PROVIDER LETTER**

**TO:** Ambulatory Surgical Centers (PT 36 / PL #A-31)

**DATE:** May 23, 2024

**RE:** Removal of Modifier 50

Effective April 1, 2024, to align with Medicare, Kentucky Medicaid began removing modifier 50 when billing for multiple surgical procedures performed on the same date of service.

When more than one covered procedure is performed in a single operative session, reimbursement for facility services will be 100 percent of the surgical group rate for the primary procedure and 50 percent of the surgical group rate for the secondary procedure.

If you have any questions concerning these changes, feel free to contact the Division of Health Care Policy at [DivisionofHealthCarePolicy@ky.gov](mailto:DivisionofHealthCarePolicy@ky.gov).

Sincerely,

*Justin Dearing*

Justin Dearing, Director  
Division of Health Care Policy  
Department for Medicaid Services

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