

PCHP Reimbursement Policy			
Topic: Radiology Modifiers – 26	Policy Number: PCHP.RI.016	Policy Section: Coding	
& TC			
Last Modification Date:	Effective Date: 5/15/2025		

Policy Disclaimer:

Please ensure adherence to correct billing and submission protocols. Utilize industry-standard, compliant codes when submitting claims. Services should be coded using Current Procedure Terminology® (CPT), Healthcare Common Procedure Coding System (HCPCS), and/or revenue codes. These codes specify the services or procedures rendered and must be fully substantiated in the medical record or office notes upon billing. Our reimbursement policies apply uniformly to both participating and non-participating professional providers and facilities, unless stated otherwise.

Failure to comply with appropriate coding/billing guidelines or current reimbursement policies may result in actions by PCHP, including claim rejection or denial, claim payment recovery/recoupment, or reimbursement adjustment to accurately reflect the services provided.

These reimbursement policies are designed to support you in submitting accurate claims and to clarify the criteria for reimbursement if PCHP covers the service under the member's benefit plan; however, coverage determination for items such as, but not limited to service, procedure, item, do not guarantee reimbursement. All billed services must align with authorization and medical necessity guidelines.

These reimbursement policies may be overridden by mandates in provider contracts, state or federal regulations, or Centers for Medicare & Medicaid Services (CMS) requirements. PCHP strives to implement policy changes promptly; any delays may necessitate recoupment of claims payment to the effective date as outlined in the policy. We reserve the right to periodically review and update these policies as needed, with the most current version available on our website upon any revisions.

Policy:

The use of Professional Component Modifier 26 and Technical Component Modifier TC may be separately reimbursable, according to contract, unless provider, state, federal, or CMS contracts and/or requirements indicate otherwise.

Professional Component (Modifier 26):

The professional component signifies when a physician or qualified healthcare professional exclusively performs the professional aspect of a global procedure or service. This distinction is indicated by appending Modifier 26 to the relevant procedure code when reported separately.

Technical Component (Modifier TC):



The technical component is identified by adding Modifier TC to the applicable procedure code when it is reported separately. Services or procedures performed by a physician or qualified healthcare professional within a facility place of service, as defined in the Related Coding section below, will not receive reimbursement for the global procedure or its technical component.

Reimbursement for the technical component of a service or procedure is exclusively allocated to the facility.

Physicians or qualified healthcare professionals may receive reimbursement solely for the professional component of the service or procedure. If applicable, arrangements should be made with the facility for reimbursement to perform any technical components of a service or procedure.

Portable X-ray suppliers should bill only for the technical component by appending Modifier TC.

Claims without billed modifiers 26 or TC:

These will be considered a global procedure and PCHP will allow reimbursement only if the same physician or other qualified healthcare professional performed both the professional component and technical component of that service.

Modifiers 26 and TC cannot be billed on an Evaluation & Management code and any claim billed will be denied or rejected.

References:

This policy has been developed through consideration of the following:

• CMS, Department of Health and Human Services, Texas Health and Human Services and all applicable agencies, National Correct Coding Initiative.

Policy History:

Description	Date
Policy Created	May 9, 2024
Policy Approved	January 30, 2025