

**Reimbursement Policy  
Provider Newsletter Article**

**Policy Update**

**Modifier 26 and TC: Professional and Technical Component**

*(Policy 15-004, effective 1/1/2020)*

**Note: The effective date of this policy update has been changed to January 1, 2020.**

Currently, Amerigroup Community Care allows reimbursement of the professional component and technical component of a global procedure or service when appended with Modifier 26 and Modifier TC unless provider, state, federal or CMS contracts and/or requirements indicate otherwise.

Reimbursement is based on the following:

- The applicable fee schedule or contracted/negotiated rate
- Physician specialty and the place of service code submitted with the claim

Effective January 1, 2020, Amerigroup will only allow reimbursement for use of Modifier 26 or Modifier TC in the following circumstances:

- Modifier 26: when reported with radiology and medicine codes
- Modifier TC: when reported with radiology codes

Please visit <https://providers.amerigroup.com/MD> to view the Modifier 26 and TC: Professional and Technical Component reimbursement policy for additional information regarding reimbursement criteria.