

Part B Insider (Multispecialty) Coding Alert

Avoid Modifier 57 Snafus with Global Surgery Know-How

Peruse the 10-day versus 90-day global package details.

A review of global surgery distinctions is a great starting point to avert modifier 57 (Decision for surgery) issues. Consider these two Medicare guidelines on 10-day and 90-day global surgery packages that may factor into your CPT® coding.

1. See CMS clarifications on 10-day global surgery packages:

- "No preoperative period,
- "Visit on day of the procedure is generally not payable as a separate service,
- "Total global period is 11 days. Count the day of the surgery and the 10 days immediately following the day of the surgery."

2. Consider the following CMS specifications to classify 90-day global period procedures:

- "One day preoperative included,
- "Day of the procedure is generally not payable as a separate service,
- "Total global period is 92 days. Count 1 day before the day of the surgery, the day of surgery, and the 90 days immediately following the day of surgery."

Remember: CMS classifies "major" surgeries with a 90-day global period designation and "minor" surgeries with a 10-day global period designation.

Resource: For a closer look at the MLN Global Surgery Booklet visit

www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/GlobalSurgery-ICN907166.pdf.