

Part B Insider (Multispecialty) Coding Alert

GLOBAL DAYS: Watch Out For Retroactive Denials Of Same-Day E/M Visits

Make a spreadsheet of your common procedures and their global periods

Minor procedures may pose a major challenge to coders, if you ignore their global periods.

Many coders don't realize that even procedures with a -0- in their global field require a modifier if the physician performs a significant and separate evaluation & management service on the same day.

Important: When the physician performs an evaluation & management (E/M) service on the same day as a procedure with a zero-day or 10-day global period, you should use the 25 modifier, not the 57 modifier. The 57 modifier is only for E/Ms on the same day as a major procedure (one with a 90-day global period), says **Jim Collins** with the **Cardiology Coalition**.

Often, coders leave out the 25 modifier on an E/M because the charge ticket for the E/M comes in first, says **Sandy Fuller**, compliance officer with **Cardiovascular Associates of East Texas** in Tyler, TX. The procedure comes in later, and when the coder bills it, Medicare will deduct the payment already made for the same-day E/M.

You should keep your eyes open for these situations, so you can appeal the reduction and add the 25 modifier to your E/M visit retroactively, says Fuller. Educate your billing staff to make sure all significant and separate E/M visits have the 25 modifier.

Remember: Even some diagnostic procedures, such as left heart catheterization (93510), may have a global period, says **April Leaver**, patient accounts manager with **Morristown Cardiology Associates** in Morristown, NJ.

Watch out: If you bill routinely for E/Ms on the same day as minor procedures, you may trigger an audit from your carrier or the HHS Office of Inspector General, warns **Stacie Buck**, vice president with **Southeast Radiology Management** in Stuart, FL. Some physicians always want to bill separately for the standard history and physical exam which are part of the pre-service work for a minor procedure, say experts.

If you perform a second procedure on the same day as a minor procedure, then you should use the 76 or 77 modifier, depending on whether it was the same procedure, says **Maggie Mac**, a healthcare consultant in Clearwater, FL.

Mistake: Don't put the 25 modifier on the procedure instead of the E/M visit, warns Mac. The OIG recommended collecting huge overpayments from providers who made this mistake in its recent report on 25 modifiers.

Bottom line: Pay attention to the global period assignment for each procedure, says **Carol Pohlig**, a senior coding and education specialist at the **University of Pennsylvania's** department of medicine in Philadelphia. Some private payors may have their own designated global periods. -Make a spreadsheet with common surgical services and their associated post-op periods by payor,- Pohlig advises.