Outpatient Facility Coding Alert

Reader Question: Think 'Same-Day Global' for ASC Cases

Question: My friend who handles billing for one of our surgeons asked me how we handle global periods for procedures done in our ASC. I didn't think that was an issue for us to consider. Am I off track?

Delaware Subscriber

Answer: Actually, you're on the right track from an ASC coder's perspective. Every procedure the ASC bills has a "same-day" global period, which makes sense because you're only reporting the facility fees, not physician services.

Example 1: A patient experiences postoperative bleeding, so the physician returns the patient to the ASC later the same day for control of bleeding. Both the physician's coder and the ASC's coder should report the appropriate code for control of bleeding, such as diagnosis 998.11 (Hemorrhage complicating a procedure) and procedure codes 42821 (Tonsillectomy and adenoidectomy, age 12 years or older) and 42962-78 (Control oropharyngeal hemorrhage, primary or secondary [e.g., post-tonsillectomy]; with secondary surgical intervention) and append modifier 78 (Unplanned return to the operating/procedure room by the same physician or other qualified healthcare professional following initial procedure for a related procedure during the postoperative period). Modifier 78 applies because the procedure occurred within the "same-day" global period for the ASC.

Example 2: A patient experiences postoperative bleeding. The physician returns the patient to the ASC the day after the initial surgery. From an ASC viewpoint, the initial surgery's global period has expired, even if the surgery includes a multi-day global period for physician services (such as 90 days). The physician's coder would still append modifier 78 to the bleeding-control code because his services were within the standard global rule. The ASC coder, however, would report the appropriate control-of-bleeding code with no modifier because the ASC global period has expired.

Takeaway: The ASC coder should follow the "same-day" global rule, but the physician's coder should follow standard global period rules from the fee schedule.