

Outpatient Facility Coding Alert

Reader Question: Use Modifier 78 for Related, Unplanned Procedures

Question: A patient had surgery for an elongated second metatarsal at the ASC where the physician performed an oblique distal osteotomy with single screw fixation. The patient is seen at weekly intervals with no complication after two weeks. At the third visit, the physician takes an X-ray and notices that the osteotomy is displaced and the screw has pulled out. When questioned, the patient says that he slipped on a step two nights ago. The physician decides to take the patient back to the operating room at the ASC to remove the screw, realign the osteotomy, fixate the bone, and immobilize the patient in a BK cast. What CPT® codes and modifiers should we submit for this claim?

Hawaii Subscriber

Answer: You would report 28322 (Repair, nonunion or malunion; metatarsal, with or without bone graft (includes obtaining graft)). This procedure has a 90-day global period.

Don't forget: In this case, you can append modifier 78 (Unplanned return to the operating/procedure room by the same physician or other qualified health care professional following initial procedure for a related procedure during the postoperative period) because this was unplanned and not part of the normal healing process.

If the podiatrist performs an unplanned procedure, you should consider the procedure billable only if performed in an operating room and modifier 78 applies. Do not bill procedures related to the problem for which the patient is in a global period (even a debridement of this post-op infection site) if the procedure occurs in the office setting.