

## Modifier Coding Alert

### Reader Question: Return to OR Calls for Modifier 78

**Question:** Our surgeon removed ear tubes in the operating room under general anesthesia. She had to return the patient to the OR within the 10-day global period of 69436 for the removal of these tubes for a documented medically relevant reason.. How do I code the return to the OR?

Wyoming Subscriber

**Answer:** Because the return to the operating room (OR) was within the 10-day global period of 69436 (Tympanostomy [requiring insertion of ventilating tube], general anesthesia), you will report 69424 (Ventilating tube removal requiring general anesthesia) with 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) attached.

Payers bundle tube removals that take place during the global period of 69436 and do not require a return to the OR, with the tympanostomy. Unless the physician removing the tubes is not the same physician who inserted the tubes (or she's not a member of the practice or if there is a medically documented reason for the removal to be performed in the operating room), you can't report the insertion and removal of the ventilating tubes separately. You can consider the tube removal as part of the E/M service performed by your ear, nose, and throat (ENT) physician under most situations.

If your ENT removes tubes placed by another practice, you can report an E/M service, even if the removal occurs in the office during the 10-day global period of 69436 because the global period doesn't apply to your ENT.