

## Modifier Coding Alert

### You Be the Coder: 'Buddy Taping': Fracture, E/M, or Both With 25?

**Question:** I work in an emergency department (ED), and I have a question about fracture care. A patient reports to the ED limping badly; after a level-three E/M service, the physician diagnoses a broken left second-digit toe. Without performing any restorative care, the ED physician "buddy tapes" the toe to the great toe. Should I code this as an E/M or with a strapping code? Do I need a modifier?

Michigan Subscriber

**Answer:** As long as the physician did not perform any restorative treatment, you should report both services, but you will need to employ modifier 25 (Significant, separately identifiable evaluation and management service by the same physician or other qualified health care professional on the same day of the procedure or other service).

**Best bet:** Providers often use buddy taping or taping the affected toe to the adjacent uninjured toe to treat fractures/sprains of the toes and fingers. Double-check the notes to ensure that the physician performed no restorative treatment. Once you're sure of that, you can first report 29550 (Strapping; toes) for the buddy taping.

Then, report 99283 (Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: An expanded problem focused history; an expanded problem focused examination; and medical decision making of moderate complexity) for the level-three E/M service you say the physician documented.

**Key:** Append modifier 25 to 99283 to show that the buddy taping and the E/M were separately identifiable services.

**Caveat:** If the care is more involved than buddy taping, your coding and modifier choice will be different. Let's say the patient in question has a displaced fracture of the left second-digit toe. Notes indicate that the physician performs a level-three ED E/M, manipulates the fracture back into alignment, and discharges the patient with orders to follow up with his primary care physician in a week. This is an example of restorative care, which is more involved than buddy taping.

On the claim, you should report 28515 (Closed treatment of fracture, phalanx or phalanges, other than great toe; with manipulation, each) for the fracture care. Append modifier 54 (Surgical care only) to 28515 to show that the ED physician only provided surgical care for the patient.

You would still report 99283-25 for the separately identifiable E/M service.