

## **Oral Surgery Coding & Reimbursement Alert**

## You Be the Coder: Don't Let Deserved Reimbursement For Arch Bar Removal Slip by

**Question:** Our oral surgeon recently performed open reduction of a mandibular fracture with interdental fixation using arch bars. We reported this procedure with 21462. After four weeks, the patient was recalled for removal of the arch bars. Since this is within the global period of 21462, I am of the contention that this procedure cannot be reported separately. But, a colleague of mine is saying that this procedure can be reported even though it falls within the global period for 21462. Who is correct?

New Jersey Subscriber

**Answer:** In most cases, any related procedure that is performed within the global period of a surgical procedure will not be separately paid out. However, this is not the case for arch bar removals that is used for interdental fixation.

Even though the global period for 21462 (Open treatment of mandibular fracture; with interdental fixation) is 90 days, you are still allowed to report the arch bar removal separately even if your surgeon performed the procedure within this period. You will report this procedure of arch bar removal with 20670 (Removal of implant; superficial (e.g., buried wire, pin or rod] [separate procedure]).

Also, there is no code bundling between 20670 and 21462 according to the Correct Coding Initiative (CCI) edits.

The American Association of Oral and Maxillofacial Surgery (AAOMS) Committee on Health Care and Advocacy has this to say: "The removal of arch bars placed in the treatment of a fracture is a separately billable service and not included in the global package of the fracture repair surgery -- regardless of who (same surgeon or different surgeon) placed the arch bars in the first place."

Since the removal occurred within the stipulated 90 days of the global period, you will need to append the modifier 58 (Staged or related procedure or service by the same physician or other qualified health care professional during the postoperative period) to 20670. If you do not add the staged procedure modifier 58 and you are in the global period, the removal will not be paid separately and will be considered part of the global service.