

Decision for Surgery Coding Policy

CPT Modifier 57 – Decision for Surgery Overview

According to CMS, the surgical package includes pre-operative visits after the decision is made to operate. Thus, to ensure payment, providers must differentiate between the E&M billed for a decision for surgery (which is payable) and an E&M billed for a pre-operative visit (which is included in the surgical package). This distinction is accomplished by using modifier 57.

- Major Surgery Any procedure with a value of 090 (90 post-operative days) in the "Global Surgery" field of the CMS NPFS
- Minor Surgery Any procedure with a value of 000 (0 post-operative days) or 010 (10 post-operative days) in the "Global Surgery" field of the CMS NPFS

Major Surgery

When a decision for surgery is made the day before or day of a major surgery, the E&M billed for the decision for surgery must have modifier –57 appended.

Minor Surgery

The decision to perform a minor procedure is typically done immediately before the service and is considered a routine preoperative service. A visit or consultation may not be billed in addition to the procedure.

Major and Minor Surgery at the same Episode

When a decision for surgery is made the day before or day of a surgery that includes both major and minor procedures, the E&M billed for the decision for surgery must have modifier –57 appended to reflect the decision for the major surgery.

Both the medically necessary E&M service and the procedure must be appropriately and sufficiently documented by the physician or qualified non-physician practitioner in the patient's medical record to support the claim for these services.

Sources

CMS

https://www.cms.gov/ Outreach-and-Education/ Medicare-Learning-Network-MLN/MLNProducts/downloads/GloballSurgery- ICN907166.pdf https://www.cms.gov/ Regulations-and-Guidance/ Guidance/Manuals/ Downloads/clm104c12.pdf CMS NPFS

https://www.cms.gov/Medic are/Medicare-Fee-for- Service-Payment/PhysicianFeeSched/PFS-Relative-Value- Files.html

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