Select Health

CODING/REIMBURSEMENT POLICY

GLOBAL SURGERY

Policy#12

Implementation Date: 1/1/06

Review Date:

Revision Date: 8/12/14

Disclaimer:

1. Policies are subject to change without notice.

2. Policies outline coverage determinations for Select Health Commercial, Select Health Advantage (Medicare/CMS), and Select Health Community Care (Medicaid/CHIP) plans. Refer to the "Policy" section for more information.

Description

Global surgery describes a defined set of bundled services that are included in the payment to a provider whenever a major/minor procedure or endoscopy is performed.

COMMERCIAL PLAN POLICY/CHIP (CHILDREN'S HEALTH INSURANCE PROGRAM)

Global surgery payment rules apply to major surgeries (postoperative period of 90 days) and minor surgeries/endoscopies (postoperative period of 0 or 10 days). For a listing of global surgery days, per procedure see the CMS Physician Fee Schedule.

Services included in the Global Surgery Fee:

Preoperative services

Preoperative visits are included in the Global Surgery Package beginning the day before surgery for major procedures and the day of surgery for minor procedures

Intraoperative services

Includes those services that are normally carried out during a given surgical procedure and are considered usual and necessary to the successful performance of the procedure

Postoperative services

Includes normal visits, minor procedures and services that are provided during the defined global surgery day period for the procedure(s) performed

• Supplies and other services for procedures performed in the office

Includes supplies and other services that are considered incidental and therefore included in the charge for a specific surgical procedure

Major Surgeries (90-Day Global Surgery Period)

Preoperative Services

Preoperative services begin the day before surgery and include E/M encounter(s) on the day before or the day of surgery.

If the decision for urgent/emergent surgery is made at the E/M encounter on the day prior to surgery or the day of surgery the visit <u>may</u> be paid if the service code is appended with modifier 57 Decision for Surgery.

Intraoperative Services

Intraoperative services include those services that are usual and necessary to the performance of a successful procedure, examples include, but are not limited to the following:

- Writing orders
- Local, digital block, or topical anesthesia
- Incision/excision
- · Control of bleeding
- Insertion/placement of tubes, drains, catheters, and lines
- Sutures/wound closure (when necessary)

• Post anesthesia evaluation and pain management in the recovery room/area

Postoperative Services

Postoperative services for major therapeutic procedure(s) include the normal uncomplicated care associated with the procedure. Complications, exacerbations, recurrences, and/or the presence and treatment of other conditions or injuries should be reported separately (for commercial). Only complications where the patient returns to the operation room (OR) are separately reportable for Medicare and Medicaid. Examples of postoperative services include, but are not limited to, the following:

- Dressings changes and wound management
- Postoperative pain management, treatment, and discharge/follow-up care
- Removal/change of packs
- Removal of sutures, staples, wires
- Removal/change of tubes (e.g., nasogastric, tracheostomy, rectal), drains, catheters, and lines
- Examination and management of the surgical wound/site

Note: Whenever possible, complications, exacerbations, recurrences, and/or the presence and treatment of other conditions or injuries that are separately reportable must be reported using a separate diagnosis, and appropriate modifiers to identify the need for the additional treatment/procedure(s) or service. Supplies and Other Services

A variety of miscellaneous supplies and services are included in the Global Surgery Policy, examples include, but are not limited to the following:

- Dressings and wound bandages
- Tape
- Surgical tray, when the procedure is performed in the provider's office
- Printed instructions or information regarding the procedure or service performed
- Surgical supplies and implants

Minor Surgeries (0 or 10-Day Global Surgery Period)

Preoperative Services

Preoperative services include visits by the same provider on the same day as a minor surgery or endoscopy.

If a related or unrelated service meets coding criteria that may warrant separate payment, append the appropriate diagnosis code(s) and modifier(s).

Intraoperative Services

Intraoperative services include those services that are usual and necessary to the performance of a successful procedure, examples include, but are not limited to the following:

- Writing orders
- Local, digital block, or topical anesthesia
- Incision/excision
- Control of bleeding
- Sutures/wound closure (when necessary)
- Post anesthesia evaluation and pain management in the recovery room/area

Postoperative Services

Postoperative services for minor surgeries with a 10-day Global Surgery period include the normal uncomplicated care associated with the procedure. Examples of postoperative services include, but are not limited to the following:

- · Dressings changes and wound management
- Postoperative pain management
- Removal/change of packs
- Removal of sutures, staples, wires
- Removal/change of tubes (e.g., nasogastric, tracheostomy, rectal), drains, catheters, and lines
- Examination and management of the surgical wound/site

Postoperative services for procedures, such as endoscopy, arthroscopy, injection procedures for radiography and endoscopies with a 0-day global period include care up to and including the recovery and discharge of the patient. All other postoperative services should be reported separately.

Other Information

For further information on the Global Surgery Policy, refer to the Medicare National Global Surgery Payment Rules listed in the Medicare national definition of a global surgery package.

SELECT HEALTH ADVANTAGE (MEDICARE/CMS)

Select Health Advantage will follow the Commercial Policy with the exception of complications of surgery. Only the treatment for postoperative complications that requires a return trip to the operating room (OR) will be covered outside of the global period.

SELECT HEALTH COMMUNITY CARE (MEDICAID)

Select Health Community Care will follow the Commercial Policy with the exception of complications of surgery. Only the treatment for postoperative complications that requires a return trip to the operating room (OR) will be covered outside of the global period.

Sources

- 1. Current Procedural Terminology (CPT®), (2014) American Medical Association.
- ICD-9-CM Coding Guidelines. (2013, January 1). Retrieved July 8, 2014, from https://www.encoderpro.com/epro/physicianDoc/pdf/i9v1/i9 guidelines.pdf
- 3. CMS. (2006, July 14). Medicare Claims Processing Manual Chapter 12 Physicians/Nonphysician Practitioners. Retrieved August 15, 2014, from https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/clm104c12.pdf
- 4. Global Surgical Package, CPT Assistant August 1998 p.5.
- CMS. (2013, August 1). Global Surgery Fact Sheet Medical Learning Network. Retrieved August 25, 2014, from http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/GloballSurgery-ICN907166.pdf

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