

Payment Policy

cmi_051728

Title	Modifier 78-Unplanned return to the Operating Room by the Same Physician for a			
	Related Procedure During Post-operative period			
Number	CP.PP.240.v2.7			
Last Approval Date	02/05/24	Original Effective Date	01/01/05	
Cross Reference	 Modifier 58 – Staged or Related Procedure or Service by the Same Physician or Other Qualified Healthcare Professional during Postoperative Period Modifier 79 - Unrelated Procedure/Service by the Same Provider During Postoperative Period Global Surgery 			

Coverage of any service is determined by a member's eligibility, benefit limits for the service or services rendered and the application of the Plan's Medical Policy. Final payment is subject to the application of claims adjudication edits common to the industry and the **Plan's professional or facility services claims coding policies**. Reimbursement is restricted to the provider's scope of practice as well as the fee schedule applicable to that provider.

Purpose	To define when the Plan recognizes services appended with Modifier 78 that are submitted on a CMS 1500 paper claim or 837P electronic claim form.
Scope	Applies to all Premera Blue Cross, Premera Blue Cross Blue Shield of Alaska, LifeWise Health Plan of Washington, LifeWise Assurance Company and Premera Blue Cross HMO lines of business and products. Medicare Advantage products are not subject to this policy.
Policy	The Plan recognizes Modifier 78- Unplanned return to the Operating Room by the Same Physician for a Related Procedure During Post-operative period when appended to a procedure warranting an unplanned return to the operating room, by the same physician or other qualified healthcare professional, during the global period of the initial procedure for a related procedure or treatment of complications requiring a return to the operating room during the postoperative period. Procedure global periods are established and identified in the current CMS National Physician Fee Schedule (LINK) in the column labeled "Global Days". Global periods for unplanned surgeries do not restart or begin a new global period. If the unplanned return is for an unrelated procedure and both are performed by the same provider who performed the initial service, use Modifier 79- Unrelated Procedure/Service by the Same Provider During Postoperative Period. If the return to the operating room was a planned or a staged procedure, use Modifier 58-Staged or Related Procedure or Service by the Same Physician or Other Qualified Healthcare Professional during Postoperative Period. Reimbursement for services appended with Modifier 78 will be adjusted to 75% of the provider's applicable Fee Schedule allowed amount.

Violations of Policy	Violations of this policy by any party that enters into a written arrangement with the Planmay result in increased auditing and monitoring, performance guarantee contractual penalties and/or termination of the contract. Disciplinary actions will be appropriate to the seriousness of the violation and shall be determined in Plan's sole discretion.	
	Violations of this policy may be grounds for corrective action, up to and including termination of employment.	
Exceptions	Oregon providers: Reimbursement will be 100% of the provider's applicable Fee Schedule allowed amount	
Laws, Regulations & Standards	None	
References	 American Medical Association's Current Procedural Terminology (AMA/CPT) codebook Centers for Medicare and Medicaid Services National Physician Fee Schedule (NPFS) 	

Policy Owner	Payment Integrity Oversight Committee		
Review			
Contact	Any questions regarding the contents of this policy or its application should be directed		
	to the Payment Integrity Department.		
Annual Review	02/05/24; 03/13/23; 04/08/22; 04/16/21; 04/30/20; 05/24/19; 06/05/18; 08/11/17;		
Dates	09/14/16; 01/08/16; 01/11/15; 01/12/14; 01/13/13; 01/26/12; 01/27/11; 02/12/10;		
	03/24/09; 06/16/08; 04/11/06; 08/29/05; 06/27/05; 07/30/04		
Version History	06/05/18	Annual Review; no changes	
	05/24/19	In the Policy section, identified which column on the CMS National Fee	
		Schedule the global days indicator is located	
	04/30/20	Annual review; no changes	
	04/16/21	Added Cross Reference to Modifier 76 Payment Policy.	
		Clarified the Purpose statement to indicate that the policy pertains to	
		Professional services billed on a CMS-1500 or 837P electronic claim	
		forms.	
		Added LINK to the National Physician Fee Schedule.	
		Added paragraph referencing Modifier 76 for repeat of the same	
		identical procedure.	
	04/08/22	Annual review; no changes	
	03/13/23	Annual review; no changes	
	02/05/24	Removed references to modifier 76 for an unplanned return to the OR for	
		a repeat of the same original surgical procedure in the global period of the	
		original surgery.	