



Decision for Surgery Modifier 57 Coding Policy

Purpose

This policy is intended to ensure correct provider reimbursement and serves only as a general resource regarding Molina Healthcare’s reimbursement policy for the services described in this policy. It is not intended to address every aspect of a reimbursement situation, nor is it intended to impact care decisions. This policy was developed using nationally accepted industry standards and coding principles. In a conflict, federal and state guidelines, as applicable, and the member’s benefit plan document supersede the information in this policy. Also, to the extent of conflicts between this policy and the provider contract language, the Provider contract language will prevail. Coverage may be mandated by applicable legal requirements of a State, the Federal government or the Centers for Medicare and Medicaid Services (CMS). References included were accurate at the time of policy approval. If there is a state exception, please refer to the state exception table listed below.

Policy Overview

According to CMS, the surgical package includes pre-operative visits following the decision to operate. Therefore, providers must differentiate between the E&M billed for a decision for surgery (which is reimbursable) and an E&M billed for a pre-operative visit (which is included in the surgical package). This distinction is achieved 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 the 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 made 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 in the Same Episode

When a decision for surgery is made the day before or the 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.

Documentation History

Type	Date	Action
Effective Date	11/20/2020	New Policy
Revised Date	10/19/2022	Updated links
Revised Date	08/16/2023	Verified links, added CMS link for global surgery booklet- TP
Revised Date	12/12/2024	Verified Links updated Template

References

Government Agencies

- CMS
- [Global Surgery Booklet \(cms.gov\)](#)
- <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c12.pdf>
- <https://www.hhs.gov/guidance/sites/default/files/hhs-guidance-documents/globalurgeryicn907166.pdf>
- CMS NPFS
- <https://www.cms.gov/medicare/medicare-fee-for-service-payment/physicianfeesched/pfs-relative-value-files>

CODING DISCLAIMER. Codes listed in this policy are for reference purposes only and may not be all-inclusive. Deleted codes and codes which are not effective at the time the service is rendered may not be eligible for reimbursement. Listing of a service or device code in this policy does guarantee coverage. Coverage is determined by the benefit document. Molina adheres to Current Procedural Terminology (CPT®), a registered trademark of the American Medical Association (AMA). All CPT codes and descriptions are copyrighted by the AMA; this information is included for informational purposes only. Providers and facilities are expected to utilize industry standard coding practices for all submissions. When improper billing and coding is not followed, Molina has the right to reject/deny the claim and recover claim payment(s). Due to changing industry practices, Molina reserves the right to revise this policy as needed.