Closed Treatment for Fracture Care without Manipulation

A fracture of “broken bone” can vary greatly in severity and treatment options. However, for billing and insurance coding purposes, caring for a fracture without manipulation (movement), surgery and without anesthesia, is called “fracture care”. These services can be provided either at the doctor’s office or in the hospital. All closed fracture treatment, without manipulation is considered “major surgery” by Federal and AMA coding systems, and is reported as surgery when billed. Therefore, on the insurance Explanation of Benefits it may reflect “surgery”.

Follow up fracture care will require a few or several post-operative visits, which are included at no charge in the fracture/surgical global fee period, if related to the same diagnosis/condition. The post-operative global days vary from 10-90 days dependent on the insurance company.

Some charges are not included in the global surgical package and will charged separately such as casting and supplies, orthotics such as bracing or splinting and subsequent x-rays.

If you do not understand your bill, please contact the insurance department at Collom & Carney Clinic.

Collom & Carney Clinic
Orthopedics Department