

Optometry Coding & Billing Alert

Alternate VF and SLGT to Keep Carriers Happy

Medicare prefers visual fields for patients with advanced glaucoma damage

Two of the best weapons in the optometry arsenal to detect and follow glaucoma are visual field (VF) tests and scanning laser glaucoma tests (SLGT). But don't make a habit of performing them both in one visit, Medicare says--unless it's absolutely necessary.

The only CPT code that appears in a bundle with 92081-92083 (Visual field examination, unilateral or bilateral, with interpretation and report ...) is 99211 (Office or other outpatient visit for the evaluation and management of an established patient, that may not require the presence of a physician ...), meaning that 99211 is the only code that Medicare has specifically forbidden you to bill along with visual fields.

Watch out, though: Your carrier may have its own opinions on whether it's appropriate to report 92135 (Scanning computerized ophthalmic diagnostic imaging [e.g., scanning laser] with interpretation and report, unilateral) for a GDx, HRT, OCT, or other SLGT along with visual fields.

-Even though TrailBlazer doesn't like them done on the same day, they understand that you may do them both together on the initial workup--but not again,- says **David Gibson, OD, FAO**, practicing optometrist in Lubbock, Texas.

Many carriers believe, as Empire Medicare Services states in its local coverage determination (LCD), that for a patient with moderate damage, the two procedures -done together or separated by a short period of time within three (3) months, are not considered medically necessary.-

However: -Alternating use of these tests at the proper time intervals can be considered appropriate, and may increase the sensitivity of detecting glaucomatous damage,- the LCD continues. And the carrier prefers visual fields to SLGT for patients with advanced damage.