

Optometry Coding & Billing Alert

Billing Question: Set 1 Fee for Post-Op Refractive Surgery

Question: How should I report a photorefractive keratotomy (PRK) follow-up exam to Medicare? Another facility performed the surgery, so this is the first time the optometrist saw the patient.

Illinois Subscriber

Answer: Medicare will not cover PRK. Therefore, you do not need to file a claim for follow-up care with the carrier. Exception: If the patient requests that you submit a claim or you need to obtain a denial for a secondary insurance, report 66999-GY (Unlisted procedure, anterior segment of eye; Item or service statutorily excluded or does not meet the definition of any Medicare benefit) with a description in Item 19 of the CMS-1500 form. Otherwise, submitting non-covered services to Medicare is not necessary, and the patient is responsible for payment of the service.

Instead: Use an internal code for PRK follow-up. Collect payment directly from the patient or the surgical center. Make this easier by billing post-op refractive surgery patients on a per-case basis for -x- number of months. Using a single charge, rather than a per-visit charge, cuts down on how many bills you send out--and try to collect on.