

Optometry Coding & Billing Alert

Coding Corner: Ease Into Using E Codes

You can never supply too much information when submitting a claim

The next time a patient presents for an eye exam after a blunt trauma, don't limit your diagnosis codes to the diagnosed condition.

Follow these introductory guidelines to using E codes to paint a complete picture of a patient's condition when you seek out reimbursement for your optometrist's services.

1. Report E codes as secondary diagnoses.

E codes are never the primary diagnosis. Always list the E codes last in the series of diagnoses linked to the primary procedure.

E codes define "external causes of injury" and thereby provide more detailed information concerning the nature or origin of a patient's injury or condition.

An E code might specify that a patient's injury was caused by an auto accident, industrial machinery or even a lightning strike, for instance, or that the patient had an adverse reaction to a drug or medication. These codes also indicate self-inflicted injuries or assaults, and they do not affect reimbursement.

2. Code to the highest level of specificity.

As with other diagnosis codes, select the appropriate fourth and fifth digits when optional.

For example, E810 alone specifies "Motor vehicle traffic accident involving collision with train," but requires a fourth digit to identify the victim of the collision (such as the motor vehicle driver, bicyclist, pedestrian, etc.).

As is true of other diagnosis codes, E codes are compiled both alphabetically and by tabular list in the ICD-9 manual. Double-check all entries from the alphabetical listing with the tabular lists to be sure you have applied the correct code.