

## Optometry Coding & Billing Alert

### Coding Quiz Answers: Shed No More Tears Over Punctal Plug Reimbursement

#### How do your answers compare with our experts'?

Read on for the answers to the punctal plug scenarios you saw earlier.

**Answer 1:** C. CPT® code 68761 (Closure of the lacrimal punctum; by plug, each) describes the insertion of a punctal plug. Optometrists insert these plugs to close the tear duct (punctum) in order to block the drainage of moisture to treat dry eye. The plugs may be temporary collagen, semi-permanent silicone, or intra-canalicular plugs. The physician uses drops to anesthetize the eye, then uses an insertion device to dilate the punctum and insert the plug.

**Answer 2:** C. HCPCS code A4262 (Temporary, absorbable lacrimal duct implant, each) describes the temporary collagen punctal plugs. A4263 (Permanent, long term, non-dissolvable lacrimal duct implant, each) describes permanent silicon plugs. Note: You would report the same CPT® code □ 68761 □ no matter which type of plug you used.

**However:** Medicare considers the plug supplies non-billable, but some non-Medicare carriers may reimburse you for them. Check with the carrier about that, and also if it prefers 99070 (Supplies and materials [except spectacles] provided by the physician or other qualified health care professional over and above those usually included with the office visit or other services rendered [List drugs, trays, supplies, or materials provided]).

**Answer 3:** D. Report 68761 on four lines, with the correct E modifier describing which eyelid was treated:

- E1 □ Left upper lid
- E2 □ Left lower lid
- E3 □ Right upper lid
- E4 □ Right lower lid

So, you would code as follows:

- 68761-E1 x 1
- 68761-E2 x 1
- 68761-E3 x 1
- 68761-E4 x 1

**Answer 4:** C. The global period of 68761 is 10 days, so a patient returning two weeks later would fall outside that period. If you are billing a non-Medicare carrier who will reimburse for the plug supply, be sure that this time you report A4263 for the permanent silicon plugs, not A4262 for the temporary collagen plugs.

**Don't miss:** There is no code for the removal of a punctal plug, says **David Gibson, OD, FAAO**, a practicing optometrist in Lubbock, Texas.

**Answer 5:** C. ICD-9 code 375.15 (Tear film insufficiency, unspecified) is accepted by most Medicare carriers as proving medical necessity for punctal plug insertion. ICD-9 also describes this condition as "dry eye syndrome."