

## **Optometry Coding & Billing Alert**

## CPT® 2012 Update: 92070 For Therapeutic Contacts? Not Anymore

New codes 92071 and 92072 carry the load for lens prescriptions for keratoconus and OSD.

Although you can't bill Medicare for regular refractive lenses, savvy optometrists know that you can expect reimbursement for contact lens prescriptions to treat keratoconus (ICD-9 codes 371.60-371.62) and ocular surface disorders (OSDs) like corneal abrasions and dry eye. However, what coders currently know is changing in 2012, with the deletion of one familiar CPT® code and the introduction of two new ones.

92070 no more: The CPT® 2012 manual deletes the optometry coder's standby for therapeutic contact lenses, 92070 (Fitting of contact lens for treatment of disease, including supply of lens). In its place, you'll find two new codes:

- 92071 (Fitting of contact lens for treatment of ocular surface disease)
- 92072 (Fitting of contact lens for management of keratoconus, initial fitting).

Notes in the CPT® manual warn you against reporting 92071 with 92072. For the supply of lenses, which was included in the code prior to 2012, CPT® suggests reporting 99070 (Supplies and materials [except spectacles], provided by the physician over and above those usually included with the office visit or other services rendered [list drugs, trays, supplies, or other materials provided), or another appropriate supply code.

A note accompanying new code 92072 advises coders to report an appropriate E/M or General Ophthalmological Services (92002-92014) code for subsequent fittings of keratoconic lenses.

## Difference in Optometrist's Work Means Difference in RVUs

Why the change? Physicians were using 92070 to report two very different kinds of services, according to the specialty societies who lobbied CPT® and the AMA's Relative Value Update Committee for the change. "Upon review of this service, the specialty societies agreed that there are two distinct uses for CPT® code 92070 that have substantially different levels of work," noted Medicare in its "Payment Policies Under the Physician Fee Schedule" final rule for 2011, published in the Federal Register on November 28, 2011.

"The CPT® Editorial Panel agreed and deleted CPT® code 92070 and created two new CPT® codes (92071 and 92072) to distinguish reporting fitting of contact lens for treatment of ocular surface disease and fitting of contact lens for management of keratoconus," continues Medicare.

To reflect the fact that contact lens management of keratoconus is more labor-intensive for optometrists than treatment of OSD, Medicare has assigned more work RVUs to 92072 (1.97 work RVUs) as compared to 92071 (0.61 work RVUs), notes **Maggie M. Mac, CPC, CEMC, CHC, CMM, ICCE,** Director of Ambulatory Hospital and Network Oversight at the Mount Sinai Medical Center Compliance Department in New York City. The work RVUs for 92071 are similar to the work RVUs assigned to 92070 in 2011, minus a few adjustments in pre- and post-service time, says Medicare.

Don't miss: The diagnosis codes for keratoconus will change with the introduction of ICD-10 in 2013. "Physicians need to be very specific in their documentation of the patient diagnosis and to support medical necessity in the medical record," says Mac. "Coders should be able to identify the correct code assignment immediately with proper documentation."

Learn more: For more information, and to view the entire Final Rule, visit <a href="www.cms.gov/PhysicianFeeSched">www.cms.gov/PhysicianFeeSched</a>.