

Optometry Coding & Billing Alert

ICD-10: Look to 6th Digit for Most Hypotony Diagnoses

Cause of condition may ease your code selection woes.

When your optometrist sees a patient with hypotony — defined as low intraocular pressure — you may think the ICD-10 manual will offer just one coding choice — but unfortunately, you'd be wrong.

Your coding choices span over a dozen options under ICD-10, and you must classify the type of hypotony, as well as the cause if you know it. Most insurers will require you to code to the sixth character for these conditions, which will require a further review of the documentation.

First, Note the Cause If You Can

Choosing the appropriate ICD-10 code from the H44.4 (Hypotony of eye) category will depend on your ability to determine whether the patient has unspecified hypotony (H44.40) or whether you know more about the condition. It's up to the optometrist to provide enough information to code beyond this basic unspecified code, and you should be able to read the documentation and glean an accurate code.

The first coding options listed in the ICD-10 manual involves flat anterior chamber hypotony (H44.41x), which typically happens after a surgery due to aqueous humor leaking from the eye and reducing the pressure. Other types of hypotony involve an ocular fistula (H44.42x), which can happen due to trauma or naturally if the patient has a related condition such as high blood pressure or vascular disease. You may also see patients with hypotony due to other eye issues (H44.43x) or with primary hypotony (H44.44x).

Remember Those Sixth Digits

Once you've selected the correct code range for your patient, you'll also add a sixth digit, depending on which eye is affected. The following sixth digits are your options when choosing a hypotony code:

1. Right eye
2. Left eye
3. Bilateral
4. Unspecified eye

Therefore, if you see a patient with bilateral hypotony due to an ocular fistula, you'll report H44.423.

Coder tip: Insurers want you to code as accurately as possible, so if your optometrist frequently fails to document the type of hypotony or the affected eye(s), you should sit down with her and let her know that chronically submitting vague and unspecified codes could lead to delays in reimbursement, or even denials.