

Optometry Coding & Billing Alert

Post-Op Management Corner: Implement These 5 Tips Today for Ironclad Cataract Care Billing

Modifiers and codes are crucial - but so is being friendly with the surgeon's billing staff

Postoperative care for cataract patients makes up a fair share of many [optometry practices](#). But are simple errors sabotaging your ability to collect? Listen to these five tips from **Regan Bode, CPC, OCS**, clinic administrator at the Northwest Eye Clinic in Lynden, Wash., to help keep your post-op earnings flowing.

1. Make sure the request for co-management is in the best interests of the patient. CMS is cracking down on co-managing between ophthalmologists and optometrists, Bode says.

"Make sure your records show the need for you to perform post-op management," she says. "Payment kickbacks to and from ophthalmologists and optometrists are illegal, so protect yourself."

2. Make sure you bill with the same date of surgery, CPT codes and ICD-9 codes as the surgeon.

3. Append modifier -55 (Postoperative management only) to the surgery CPT code. It should be the first modifier on the claim, Bode says.

4. Place the dates during which you are managing the postoperative period in box 19 on the HCFA form.

5. Make sure the surgeon reports his surgical service with modifier -54 (Surgical care only) appended to the CPT code for the procedure, or your claim will be denied.

Having a good relationship with the coder or biller at the surgeon's office will ensure proper coding and payment on shared post-op periods, Bode says.

Communication between the optometrist and the ophthalmologist is also essential, says **David Gibson, OD, FAAO**, an optometrist practicing in Lubbock, Texas.

"The surgeon needs to feel comfortable with the abilities of the optometrist to be able to handle post-operative care," he says. "As optometrists, we need to be sure our patients are receiving the same care they would receive if the surgeon provided the follow-up care. I encourage optometrists to communicate, communicate and communicate some more with their surgeons for the patient's and doctor's best interest."

Remember: You should not submit your co-management claim until you've seen the patient back in your office after the surgery. But your co-management actually begins on the day the surgeon transfers the patient's care to you, even if that day is before your first visit with the patient, says **Charles Wimbish, OD**, president of Wimbish Consulting Group in Martinsville, Va.

Note: To test your knowledge of post-op co-management billing and coding, see "Quick Quiz: Pick the Right Modifier to Report Post-Op Cataract Care" in the February 2005 Optometry Coding & Billing Alert.