

Optometry Coding & Billing Alert

READER QUESTIONS: Append 25 to Visit Code, Not Test

Question: Should I append modifier 25 to 92225 when I-m also reporting a comprehensive eye exam with 92014?

Vermont Subscriber

Answer: No. You can report testing services such as 92225 (Ophthalmoscopy, extended, with retinal drawing [e.g., for retinal detachment, melanoma], with interpretation and report; initial) along with comprehensive eye exam codes 92004 and 92014 (Ophthalmological services: medical examination and evaluation ...) without appending modifier 25 (Significant, separately identifiable evaluation and management service by the same physician on the same day of the procedure or other service).

Although a comprehensive eye exam includes routine ophthalmoscopy, it does not generally include extended ophthalmoscopy, so you are free to code for it separately.

You might still see denials, however. Some carriers have a long-time edit in place not to pay for extended ophthalmoscopy when billed with 92014.

If this is the case in your area, you will either need to bill the services and end up in the review and appeal process proving medical necessity or select the intermediate-level eye code or E/M code instead of the comprehensive eye code.

Remember: When it's necessary to append modifier 25, only append it to the eye exam code or E/M code, not to a procedure code like 92225.

Use modifier 25 when you perform an unrelated E/M service along with a minor procedure--one that has 10 or fewer days in the global surgical period as defined by Medicare.