

## Optometry Coding & Billing Alert

### Reader Questions: J2001 Is No-Go for Minor In-Office Procedures

Question: Is there a code we should bill for subcutaneous lidocaine or lidocaine with epinephrine during an office procedure? Some of the optometrists in our group are asking for a code on the superbill, whereas others think we should count it in the procedure code. Should we bill separately for the lidocaine injections?

North Dakota Subscriber

Answer: The doctors in your group who state that the lidocaine injections should be counted as part of the procedure are partially correct. Medicare specifies that local anesthetic use is "an inherent surgical procedure component, and is not billable separately."

Medicare includes all "surgical anesthesia" administered by the operating doctor as part of the surgical package, meaning it is not a separately payable service. Many private, non-Medicare or commercial insurance carriers also won't pay for topical or local anesthesia.

The only code for lidocaine is J2001 (Injection, lidocaine HCl for intravenous infusion, 10 mg). In 2004, CMS deleted J2000 (Injection, lidocaine HCl, 50 cc), which many practices were inaccurately using to bill for injected lidocaine. When coding for Medicare, you cannot consider J2001 as a J2000 substitute, however, because the code descriptor specifies that the doctor must administer the lidocaine via an IV infusion to use this code. In fact, the Correct Coding Initiative (CCI) bundles J2001 with many minor procedure codes to specifically prevent you from reporting it with an injection code.

Alternative: For non-Medicare carriers that accept S codes, consider using S0020 (Injection, bupivacaine HCl, 30 ml, use this code for Marcaine, Sensorcaine) for billing the drug itself when your doctor administers it in the office setting.