

## Optometry Coding & Billing Alert

### READER QUESTIONS :Specify Tech vs. Physician With Lens Codes

**Question:** My optometrist sees routine patients for services such as contact lens fittings. What's the difference between the 92310-92313 series of procedure codes and the 92314-92317 series? When should I choose a code from one series over the other?

New York Subscriber

**Answer:** CPT codes 92310-92313 (Prescription of optical and physical characteristics of and fitting of contact lens, with medical supervision of adaptation ...) describe fitting of contact lenses by an optometrist or other qualified physician.

Codes 92314-92317 (Prescription of optical and physical characteristics of contact lens, with medical supervision of adaptation and direction of fitting by independent technician ...) describe fittings done by an independent technician in the optometrist's office.

Bill 92310-92313 only if the optometrist or another physician in your office -- not an independent technician -- is doing the contact lens fitting as well as supervising the adaptation. Medicare will not reimburse for 92310 or 92314 (& corneal lens, both eyes, except for aphakia), because they correct only refractive error. You should be able to get reimbursement for contact lens services for aphakic patients by reporting 92311 (... corneal lens for aphakia, 1 eye), 92312 (... corneal lens for aphakia, both eyes), or 92313 (... corneoscleral lens).

If the optometrist is writing the prescription but an independent contractor technician in your office does the actual fitting, report 92315 (Prescription of optical and physical characteristics of contact lens, with medical supervision of adaptation and direction of fitting by independent technician; corneal lens for aphakia, 1 eye), 92316 (... corneal lens for aphakia, both eyes), or 92317 (... corneoscleral lens).