

Optometry Coding & Billing Alert

Reader Questions: Use 54 to Unlock Post-Op Pay

Question: We're having trouble filing for postoperative care for a YAG. How should we code this?

Texas Subscriber

Answer: Report 66821 (Discission of secondary membranous cataract [opacified posterior lens capsule and/or anterior hyaloid]; laser surgery [e.g., YAG laser] [one or more stages]) and append modifier 55 (Postoperative management only). This tells the carrier that you are seeking payment only for the postoperative management of the surgery, not the entire global procedure (which includes pre-, intra- and postoperative components).

Watch for: For a successful modifier 55 claim, the surgeon who performed the YAG must append modifier 54 (Surgical care only) to his claim. If the surgeon submits an unmodified claim, the carrier will assume that he performed the entire global service, including the postoperative management.

Note: For more information on postoperative management of ophthalmic surgery, see "Implement These 5 Tips Today for Ironclad Cataract Care Billing" in the April 2005 Optometry Coding and Billing Alert.