

Optometry Coding & Billing Alert

Support 92135 With This Documentation Checklist

To be useful, your I&R will need 7 items

Rest assured that your SLGT charges will pass muster if you're ever audited by listing seven details in [CPT 92135](#) chart notes.

1. Describe Scan's Medically Necessary Reason

To protect your payment for 92135 (Scanning computerized ophthalmic diagnostic imaging [e.g., scanning laser] with interpretation and report, unilateral), you should have a documented reason for the laser scan in the patient's record, and the reason must demonstrate medical necessity for the service.

For example, if a patient presents with increased intraocular pressure, an SLGT may help determine whether the patient is in the early stages of glaucoma, a circumstance that supports medical necessity.

2. Document Reason per Eye

Next, remember to document the medical necessity for the scan for each eye. Each of these scans is a separate test and payment.

3. Note Test Request

Make sure you also have a written request for the tests in your documentation, says **Krystin Keller, CPC**, insurance specialist and billing manager at Five Points Eye Care in Athens, Ga., and consultant with Forch- Consulting Group.

4. Include I&R in Chart

Code 92135 also requires an interpretation and report (I&R). "CPT and Medicare do not define what an -interpretation and report- should consist of," says **David Gibson, OD, FAAO**, practicing optometrist in Lubbock, Texas.

Best practice: Do the report in a way that is meaningful to you or the next doctor your patient may see, Gibson says. "Keep it short and to the point, but ask yourself, -Will another doctor know what I am thinking about this patient?- "

5. Put Next Test Date, Issues in -I-

In the test result interpretation, most importantly, you should indicate when the patient needs to repeat the test, Gibson says. You may also include any issues regarding the test's quality, reliability of the findings, and any treatment implications.

6. Describe Your Findings in -R-

In the report, summarize what findings you can abstract from the test.

7. Attach Your John Hancock

Even if you're in a solo practice, sign your report on the test printout or on a separate I&R form. "It's probably best to use a separate form, unless the test printout has a dedicated space for I&R like the GDx printout does," Gibson says. If you use a separate form, make sure to attach it to the test printout.

Fast Facts on 92135

Code optical coherence tomography (OCT) or a retinal thickness analyzer (RTA) with 92135 (Scanning computerized ophthalmic diagnostic imaging [e.g., scanning laser] with interpretation and report, unilateral).

Use this same code to report all scanning laser glaucoma tests (SLGT).

2007 Medicare Physician [Fee Schedule](#) Allowable: Code 92135 contains 1.16 office relative value units, which equates to \$43.96.

Sample covered diagnosis codes include (note that this is not a complete list):

- 362.85 -- Retinal nerve fiber bundle defects
- 364.22 -- Glaucomatocyclitic crises
- 365.00 -- Preglaucoma, unspecified
- 365.04 -- Ocular hypertension
- 365.10 -- Open-angle glaucoma, unspecified
- 365.11 -- Primary open-angle glaucoma
- 365.12 -- Low tension glaucoma
- 365.13 -- Pigmentary glaucoma
- 365.14 -- Glaucoma of childhood
- 365.15 -- Residual stage of open-angle glaucoma
- 365.20 -- Primary angle-closure glaucoma, unspecified
- 365.21 -- Intermittent angle-closure glaucoma
- 365.22 -- Acute angle-closure glaucoma
- 365.23 -- Chronic angle-closure glaucoma
- 365.24 -- Residual stage of angle-closure glaucoma
- 368.40 -- Visual field defect, unspecified
- 377.00 -- Papilledema, unspecified
- 377.15 -- Partial optic atrophy
- 377.9 -- Unspecified disorder of optic nerve and visual pathways.

Codes bundled with 92135 by Correct Coding Initiative (CCI): 99211, 92250.