

Optometry Coding & Billing Alert

You Be the Coder: Long-Standing Strabismus

Question: Another ophthalmologist referred a new patient with long-standing strabismus to us. How should I code this visit?

North Dakota Subscriber

Answer: The answer depends upon why the referring ophthalmologist sent the patient to your physician.

1) Was this a request for second opinion with recommendations for care?

2) Or was this referral due to a general ophthalmologist asking a second ophthalmologist who specializes in strabismus-related surgery to take over management of the patient's problem?

A consultation code (99241-99245) may be billed if the referral was for scenario #1 above. However, if scenario #2 is more accurate, then bill the office visit with code 99201-99205 for a new patient or 99211-99215 for an established patient.

If you also perform a sensorimotor exam, be sure to report it separately with 92060 (Sensorimotor examination with multiple measurements of ocular deviation [e.g., restrictive or paretic muscle with diplopia] with interpretation and report [separate procedure]). If you use this code, you are also required to complete a separate interpretation and report.

Watch out: A sensorimotor exam is considered bundled with code 99211 and should not be separately billed.