Optometry Coding & Billing Alert

You Be the Expert: Glaucoma Diagnosis Scan

Question: What's the proper way to bill a GDxscan to Medicare?

Missouri Subscriber

Answer: Use 92135 (Scanning computerized ophthalmic diagnostic imaging [e.g., scanning laser] with interpretation and report, unilateral) to report the GDx (glaucoma diagnosis) nerve fiber analysis scan. If you perform it bilaterally, report 92135 either with modifier -50 (Bilateral procedure), with the alpha-modifiers -LT and -RT, or with a "2" in the units column.

Be sure there's a documented order for the scan in the patient's chart, and include the referring physician's name and UPIN on the billing form.

Medicare splits the fee for 92135 into technical and professional components. If you perform, and interpret, the test, you should be able to claim the full fee by reporting 92135 with no modifiers.

Exception: If your practice is in a Medicare Health Professional Shortage Area (HPSA), payments are only made on the professional component of the service. To qualify for payment for the technical component, report 92135-26-50-QU (Professional component; bilateral procedure; physician providing service in an urban HPSA) for the professional component (appending modifier -50 to indicate a bilateral test and modifier-QU to indicate your HPSA status) and 92135-TC-50 (Technical component) on the second line of the billing form for the technical component.