

Outpatient Facility Coding Alert

Reader Question: 66985 Focuses on Secondary Implant

Question: We have a patient scheduled for a secondary IOL (intraocular lens) implant. How do I know whether to code with 66985 or 66986?

Tennessee Subscriber

Answer: You'll need to know a bit about the patient's history in order to choose the correct code.

If the patient had previous cataract surgery but did not have a lens implanted at the time, report 66985 (Insertion of intraocular lens prosthesis [secondary implant], not associated with concurrent cataract removal) for the upcoming procedure.

Example 1: Complications during the original cataract surgery could keep the surgeon from implanting the IOL at that time, which is why he may need to perform 66985 at a later date.

Example 2: Also report 66985 if the surgeon is inserting a "piggyback" IOL after a previous cataract surgery. If he inserts the piggyback IOL during the cataract surgery, however, you'll choose from three other codes instead: 66982 (Extracapsular cataract removal with insertion of intraocular lens prosthesis, manual or mechanical technique, complex, requiring devices or techniques not generally used in routine cataract surgery or performed on patients in the amblyogenic developmental stage), 66983 (Intracapsular cataract extraction with insertion of intraocular lens prosthesis), or 66984 (Extracapsular cataract removal with insertion of intraocular lens prosthesis, manual or mechanical technique).

Turn to 66986 (Exchange of intraocular lens) if the surgeon is exchanging a previously implanted IOL. This procedure is rare, but it's necessary in some cases (as in, if the previous implant turns out to be the wrong power or if the lens gets dislocated and the surgeon can't reposition it safely). When 66986 applies, don't report an additional code for removing the previous lens; that is included in 66986.