

Outpatient Facility Coding Alert

Reader Question: Decode This Pupilloplasty Coding Puzzle

Question: If the physician performed a pupilloplasty, which CPT® code should I report?

Colorado Subscriber

Answer: When the physician performs a pupilloplasty with a laser to improve vision, you will report 66762 (Iridoplasty by photocoagulation (1 or more sessions) (e.g., for improvement of vision, for widening of anterior chamber angle)). If glaucoma was the cause, and the physician performs the procedure without a laser, report 66630 (Iridectomy, with corneoscleral or corneal section; sector for glaucoma (separate procedure)). On the other hand, if the physician used a laser, report 66761 (Iridotomy/iridectomy by laser surgery (e.g., for glaucoma) (per session)).

Pupilloplasty is a procedure that enlarges the pupil's size by opening the visual axis. The physician performs this procedure when small pupils are unresponsive to pharmacological dilation for near-vision problems caused by small pupil size, acute angle closure glaucoma, or by post cataract treatment and presbyopic lens extraction.

Patients with acute primary-angle closure (PAC) have pain, disturbed vision, and almost always have a higher intraocular pressure (IOP) than occurs with primary open-angle glaucoma. The physician usually performs a pupilloplasty with an argon laser, and this procedure provides a noninvasive treatment for PAC. The laser is focused through the center of a three-mirror lens; the radial burns cause the pupil to enlarge as the iris tissue contracts. (In children having congenital cataracts or PHPV with scar tissue that closed the pupil until it's too small to be useful, and who cannot be still enough for a laser, surgery opens the scar tissue and iris to enlarge the visual axis.)