On behalf of Vision Expo, we sincerely thank you for being with us this year.

Vision Expo Has Gone Green!

We have eliminated all paper session evaluation forms. Please be sure to complete your electronic session evaluations online when you login to request your CE Letter for each course you attended! Your feedback is important to us as our Conference Advisory Board considers content and speakers for future meetings to provide you with the best education possible.

1

Financial Disclosures

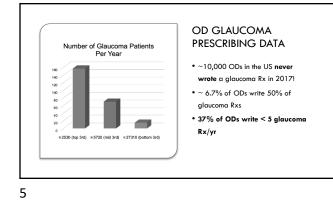
Kyle D. Klute, O.D. has no financial disclosures to include

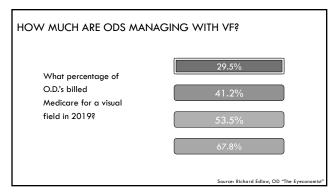
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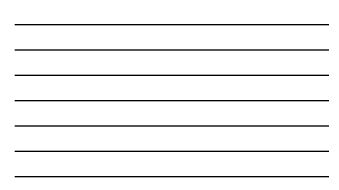
BUILDING A GLAUCOMA PRACTICE

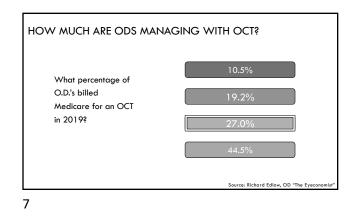
COMBINING STANDARDS OF CARE WITH BILLING AND CODING KYLE D. KLUTE, O.D., F.A.A.O.

OPTOMETRISTS SHOULD OWN CHRONIC GLAUCOMA MANAGEMENT

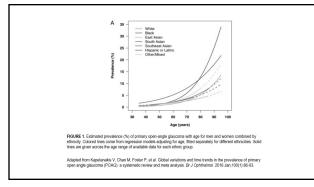








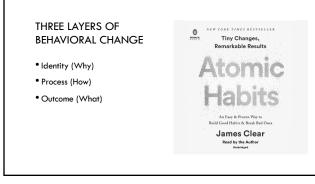


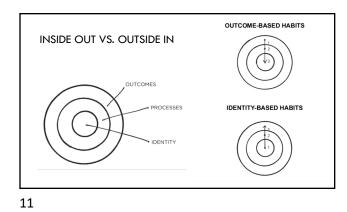


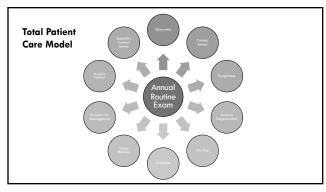
GLAUCOMA RISK FACTORS

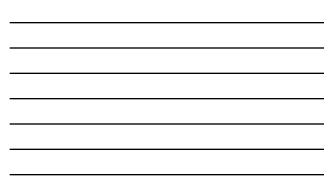
Elevated IOP

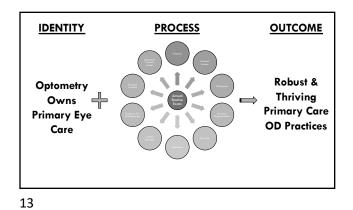
- Older age
- Family history of glaucoma
- African race or Latino/Hispanic ethnicity
- Thin central cornea
- Low ocular perfusion pressure
- Type 2 DM
- Myopia
 - Low systolic and diastolic blood pressure
 - Disc hemorrhage
 - Large cup-to-disc ratio
 - High pattern standard deviation on threshold visual field testing
 - Hypothyroidism
 - Male sex
 - Other: Migraine headache, sleep apnea,
 - peripheral vasospasm, cardiovascular disease, low corneal hysteresis, and systemic hypertension



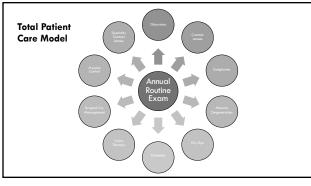




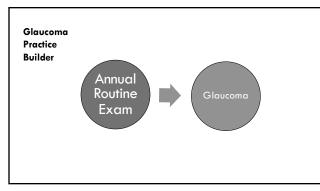


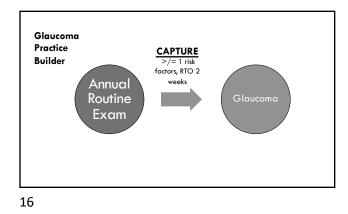




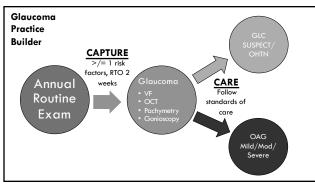






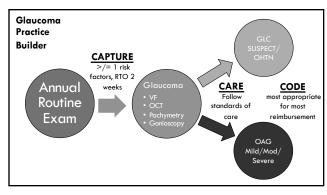




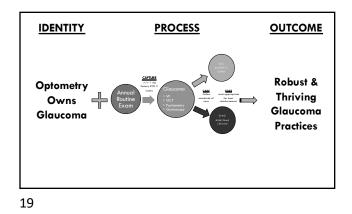




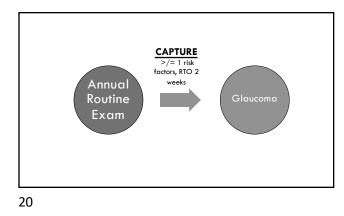


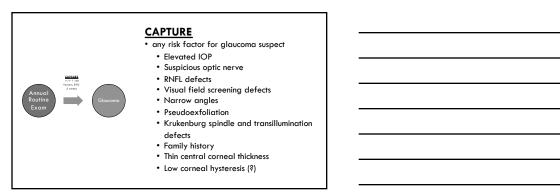


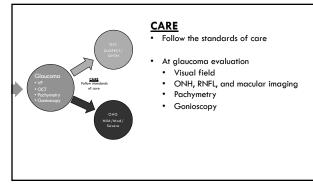








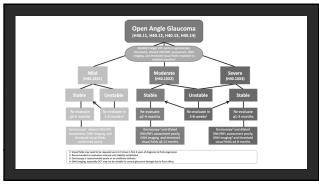




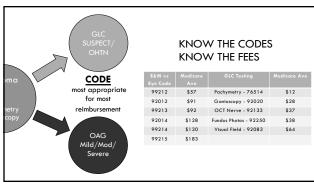
	OAG Suspect						
Low risk	High Risk	Mild	Moderate	Severe			
H40.01x	H40.02x	H40.11x2	H40.11x3	H40.11x4	H40.03x	H40.06x	H40.20x
1-2 risk factors	3 or more risk factors	Optic disc, RNFL, and/or macular imaging abnormalities consistent with glaucoma and NO visual field defects	Optic disc, RNFL, and/or macular imaging abnormalities consistent with glaucoma AND visual field defects in ONE hemifield NOT within 5 degrees of fixation	Optic disc, RNFL, and/or macular imaging abnormalities consistent with glaucoma AND visual field defects in BOTH hemifields AND/OR within 5 degrees of fixation	2 quadrants or more of irido- trabecular contact (ICT), NORMAL IOP, and NO optic nerve damage	2 quadrants or more of irido- trabecular contact (ICT), ELEVATE IOP, and NO optic nerve damage	2 quadrants or more of irido- trabecular contact (ICT), ELEVATED IOP, AND optic nerve damage

			Dilated ONH/RNFL assessment	ONH and macular imaging	
OHTN	Annually ¹	Initial eval only	Annually ¹	Annually	Annually
Glaucoma Suspect	Annually ¹	Initial eval only	Annually ¹	Annually	Annually
Mild Glaucoma, Stable	Annually ¹	Initial eval only	Annually ¹	Annually	Annually
Mild Glaucoma, Unstable ³	Annually ¹	Initial eval only	Annually ¹	Annually or repeated each time changes occur	Annually or repeat each time change occur
Moderate Glaucoma, Stable	Annually ¹	Initial eval only	Annually ¹	Every 6-12 months	Every 6-12 month
Moderate Glaucoma, Unstable ³	Annually ¹	Initial eval only	Annually ¹	Every 6-12 months or repeated each time changes occur	Every 6-12 months repeated each tim changes occur
Severe Glaucoma, Stable	Annually ¹	Initial eval only	Annually ¹	Every 4-8 months ²	Every 4-8 months
Severe Glaucoma, Unstable ³	Annually ¹	Initial eval only	Annually ¹	Every 4-8 months or repeated each time changes occur ²	Every 4-8 months of repeated each tim changes occur
1: Or as conditions indicate					
² : ONH imaging, especially	OCT may not be reliable	e to monitor severe glaucom	a due to "floor effect"		



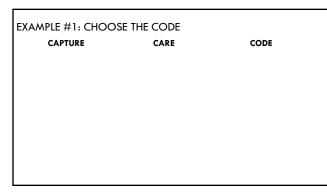






		Data		
2	•1 Self-limited or minor problem	•Minimal (< 2) or no orders, tests performed, or additional documents analyzed	Minimal Minimal risk of morbidity from additional diagnostic testing or treatment	NP:15-29 mins EP: 10-19 mins
	Low. •2 or more self-limited or minor problems; or •1 stable chronic illness; or •1 ocute, uncomplicated illness or injury	Limited •2 orders, tests performed, or additional documents analyzed, or •assessment requiring an independent historian	Low risk of morbidity from additional diagnositic testing or treatment. Example: •OTC medication	NP: 30-45 min EP: 20-29 mins
	Moderate 1 or more chronic illessay with excorrbation, prograssio, or side effects of treatment; or 2 or more table chronic illnessay or 1 undigonsed new problem with uncertain prognality; or 1 acate illness with systemic symptom; or 1 acate acate complicated injury	Any 1 of the following: -3 orders, tests performed, or additional documents analyzed "Andependent trepretarion of a test performed by aonther physician "Discussion of management or test interpretation with external physician	Moderate rike of marking man cabliconal diagnostic tening or treatmer. Example: "Prescription degreedings medications "Decision regarding miker surgery with identified patient or procedure risk" (ctors "Decision regarding medications "Decision regarding medications") "Decision regarding medications "Decision regarding medications" "Decision regarding medications "Decision regarding medications" "Decision regarding medications "Decision regarding medications" "Decision regarding medications" "Decision regarding medications "Decision regarding medications" "Decision regarding medications"	NP: 45-59 mins EP: 30-39 mins
	 High and a more chronic linesses with severe excertation, progression, or side effects of treatment; or 11 acces or threat lines or injury that poses a threat to life or bodily function 	Extensive Any 2 of the following: -3 orders, tests performed, or additional documents analyzed - "Modeparidant tripprotection of a test performed by another physician - "Discussion of neurogeneric or test interpretation with external physician	High risk of morbidity from additional diagnostic tearing or treatment. Examples: "One theory requiring identities monitoring for tracking "Decision or discussion under sergery with destinitial partners or "Decision for energy under surgery." "Decision for energy in the sphalatation "Decision for energy examples to the second or core because of "Decision regarding hesphalatation."	NP: 60-74 mins EP: 40-54 mins





	Data		Time
Minimal Self-limited or minor problem	•Minimal (< 2) or no orders, tests performed, or additional documents analyzed	Minimal Minimal risk of morbidity from additional diagnostic testing or treatment	NP:15-29 mins EP: 10-19 mins
•2 or more self-limited or minor problems; or •1 stable chronic illness; or •1 ocute, uncomplicated illness or injury	Limited 2 orders, tests performed, or additional documents analyzed, or -assessment requiring on independent historian	Low risk of morbidity from additional diagnostic testing or treatment. Example: -OTC medication	NP: 30-45 mins EP: 20-29 mins
Moderste 1 or more chronic illesses with excentration, programsin, or side effects of reatment; or 2 or more stable chronic illnesses; or 1 undigansed new problem with uncertain proponisi; or 1 acte illness with systemic symptom; or 1 acte complicated injury	Any 1 of the following -3 octors, testi participal, or additional documents, markyrol -independent interpretation of a test performed by arather physician -Biscusion of management or test interpretation with external physician	Macharate this of munching Macharate or treatment: Example: Prescription degradient and an anti- "backion regarding mines examps, with identified potient or procedure nik factors "backion regarding major surgery without identified potient or procedure nik factors "Diagonia or teatment digntificantly limited by social direterminana of teath	NP: 45-59 mins EP: 30-39 mins
High -1 or more chuncic illustes with severe exactrbation, prograssio, or side effects of treatment; or -1 acute of draches: lines or injury that poses a threat to life or badily function	Extensive Any 2 of the following: -3 orders, tests performed, or additional documents motyped -**dependent interpretation of a set performed by another physician -*Discussion of management or test interpretation with external physician	High risk of mochidiny methods and disspontic tearting or treatment. Examples: "Dough theory requiring islamitive motioning for taxisity "Decision for elective magic surgery with identified partient or procedure risk for taxis and the surgery taxis in the surgery taxis is the surgery taxis in the surgery taxis in the surgery taxis is the surgery taxis in the surgery taxis in the surgery taxis is the surgery taxis in the surgery taxis is the surgery taxis is the surgery taxis in the surgery taxis is the surgery taxis is the surgery taxis in the surgery taxis is the sur	NP: 60-74 mins EP: 40-54 mins

29

92012 INT OPHTHALMOLOGICAL SERVICES

- "describes an evaluation of a new or existing condition complicated with a new diagnostic or management problem not necessarily relating to the primary diagnosis, including history, general medical observation, external ocular and adnexal examination and other diagnostic procedures as indicated; may include the use of mydriasis for ophthalmoscopy"
- "Ophthalmological services; medical examination and evaluation, with initiation or continuation of diagnostic and treatment program; intermediate, established patient"

CPT Professional 2022. Page 736 and 738

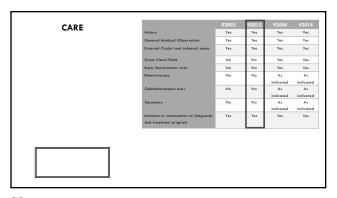
92014 COMP OPHTHALMOLOGICAL SERVICES

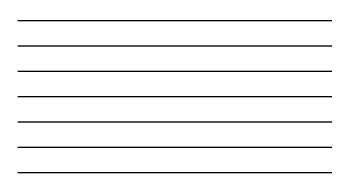
 "describes a general evaluation of the complete visual system. The comprehensive services constitute a single service entity but need not be performed at one session. The service includes history, general medical observation, external and ophthalmoscopic examinations, gross visual fields and basic sensorimotor examination. It often includes as indicated, biomicroscopy, examination with cycloplegia or mydriasis and tonometry. It always includes initiation of diagnostic and treatment programs."

CPT Professional 2022. Page 737

31

	92002		92004	
History	Yes	Yes	Yes	Yes
General Medical Observation	Yes	Yes	Yes	Yes
External Ocular and Adnexal exam	Yes	Yes	Yes	Yes
Gross Visual Field	No	No	Yes	Yes
Basic Sensorimotor eval	No	No	Yes	Yes
Biomicroscopy	No	No	As indicated	As indicated
Ophthalmoscopic eval	No	No	As indicated	As indicated
Tonometry	No	No	As indicated	As indicated
Initiation or continuation of diagnostic and treatment program	Yes	Yes	Yes	Yes



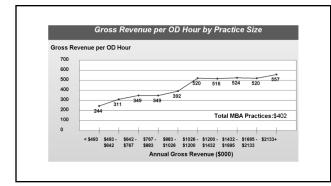


EXAMPLE #1: CHOOSE THE CODE, MEDICAL VISIT #2 CAPTURE CARE CODE

34

Problems	Data	Risk	Time
Minimal Self-limited or minor problem	•Minimal (< 2) or no orders, tests performed, or odditional documents analyzed	Minimal Minimal risk of morbidity from additional diagnostic testing or treatment	NP:15-29 mins EP: 10-19 mins
 2 or more self-limited or minor problems; or 1 stable chronic illness; or 1 scate, uncomplicated illness or injury 	Corders, tests performed, or additional documents analyzed, or "assessment requiring on independent historian	Low risk of morbidity from additional diagnostic testing or treatment. Example: -OTC medication	NP: 30-45 mins EP: 20-29 mins
Moderste a or more chronic illesses with excertbrotion, progradu, or side effects of treatment; or 2 or more stable chronic illnesses; or 1 undigonsed new problem with uncertain propositio; or 1 acte illness with systemic symptom; or 1 acte complicated injury	Any 1 of the forwards Any 1 of the forwards -2 orders, tests performed, or additional documents analysed -independent interpretation of a test performed by another physician -Discussion of management or test interpretation with external physician	Moderate risk of motify from additional diagnostic testing or treatmer. Examples: "Personalisen development and the sensitive of the sensitive "backsion regarding miner warps, with identified positient or procedure risk factors: "backsion regarding miner sensitive risk in the sensitive of the sensitive "backsion regarding miner sensitive", and the sensitive of the sensitive distance of the sensitive of th	NP: 45-59 mins EP: 30-39 mins
 I or more chinais diseases with severe exceribation, programsion, or side effects of treatment; or "a coste or chorace". Eless or injury that poses a threat to life or badily function 	Extensive Any 2 of the felderome: -3 orders, tests performed, or additional documents nonty-performed independent interpretation of a test performed by conduct physicalism ent or test interpretation with external physician	High High High risk of morbidity throm collimation disquaretic testing or treatmer. Examples:	NP: 60-74 mins EP: 40-54 mins

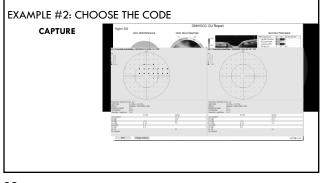
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EXAMPLE #1: REVENUE PER OD HOUR						
Exam	Time	Services	Fees (Medicare)			
2 Week F/U	30 minutes	92012, 92083, 92132, 76514, 92020	\$91, \$64, \$37, \$12, \$28			
Annual Exam	30 minutes	92014, 92015, 92225	\$128, \$50, \$38			
\$700 - \$1000 / 1.75 HOURS = \$400 - \$571						





EXAMPLE #2: CHOOS	SE THE CODE	
CAPTURE	CARE	CODE

	Problems	Data	Risk	Time
99202 99212	Self-limited or minor problem	•Minimal (< 2) or no orders, tests performed, or additional documents analyzed	Minimal risk of morbidity from additional diagnostic testing or treatment	NP:15-29 mins EP: 10-19 mins
99203 99213	Law 2 or more self-limited or minor problems; or 1 stable chronic illness; or 1 soute, uncomplicated illness or injury	Limited • 2 orders, tests performed, or additional documents analyzed, or • assessment requiring an independent historian	Low risk of morbidity from additional diagnostic testing or treatment. Example: •OTC medication	NP: 30-45 mins EP: 20-29 mins
99204 99214	Moderate or more chronic illeases with exacutability, prograshing, or side effects of reatment; or 2 or more stable chronic illnesses; or 1 undignosed new problem with uncertain prognabil; or 1 acte illness with systemic symptoms; or 1 acte complicated injury	Any 1 of the full and the second	Modernie rüc of muchching Three additional disgnostic tenting es treatmer. Examples Prescription dorge medication "Decision regarding mines examps with identified patient or procedure nick factors "Decision regarding megie surgery without identified patient or procedure nick factors "Diagonal or treatment significantly limited by social direterminans of brainfactors]	NP: 45-59 mins EP: 30-39 mins
99205 99215	 I or more chronic illesses with severe axochrotins, progradu, or side effects of treatment; or 1 ocate or chronic illess or injury that poses a threat to life or bodily function 	Extensive Any 2 of the following - 3 orders, tests performed, or additional documents analyzed - hidependent interpretation of a test performed by another physician - 50xxxian of management or test interpretation with external physician	High risk of mochidiny model disspontie tearing or treatment. Examples: "Dough theory requiring identifies monitoring for taxitity "Dockin for electron magie surgery with identified partient or procedure ink forcators "Dockin for emergency major surgery "Dockin for emergency major surgery Dockin for emergency major surgery Dockin en to resuccints or to desculate care because of poor programs"	NP: 60-74 mins EP: 40-54 mins

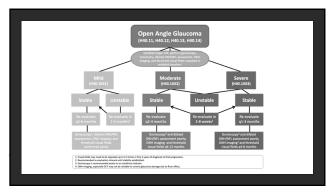
CAPTURE	CARE	CODE
CAFTORE	CARE	CODE

EXAMPLE #2: CHOOSE THE CODE, MEDICAL VISIT #2			
CARE	CODE		

CAPTURE	CARE	CODI
Table 2. Setting Tr	reatment Target Intraocular Pressure	
Baseline Disease Severity	Treatment Target IOP	
OHT	>20% IOP reduction from baseline IOP or IOP <25 mmHg (whichever lower)	
Mild OAG	>20% IOP reduction from baseline IOP or IOP <21 mmHg (whichever lower)	
Moderate OAG	>30% IOP reduction from baseline IOP or IOP <18 mmHg (whichever lower)	
Severe OAG	>30% IOP reduction from baseline IOP or IOP <15 mmHg (whichever lower)	
IOP = intraocular pressure; hypertension.	OAG = open-angle glaucoma; OHT = ocular	

Problems	Data	Risk	Time
Minimal Self-limited or minor problem	*Minimal (< 2) or no orders, tests performed, or additional documents analyzed	Minimal Minimal risk of morbidity from additional diagnostic testing or treatment	NP:15-29 mins EP: 10-19 mins
2 or more self-limited or minor problems; or 1 stable chronic illness; or 1 acute, uncomplicated illness or injury	Orders, tests performed, or additional documents analyzed, or "assessment requiring on independent historian	Low risk of morbidity from additional diagnostic testing or treatment. Example: •OTC medication	NP: 30-45 mins EP: 20-29 mins
Moderate a correct chronic Illesses with excorectrolino, progression, or side effects of recentary or 2 or more stable chronic Illesses; or -1 undiagnosed new problem with uncertain prognasis; or -1 accele Illesse with systemic symptoms; or -1 accele complicated injury	Any 1 of the forwards -1 orders, tests performed, or additional documents motyped -1udependent interpretation of a test performed by another physician -Discussion of management or test interpretation with external physician	Moderate vide of motivation from colditional diagnostic testing or treatmer. Examples: "Precediption dege medication "backsion regarding miner surgery with identified positiest or procedure vide factors "Calcolion regarding medic surgery without identified positiest or procedure vide factors "Calcolion is treatment dignificantly limited by social direterminants of the factors	NP: 45-59 mins EP: 30-39 mins
•1 or more chronic illustes with severe exocarbation, program, or side effects of treatment; or *1 ocate or chronic illness or injury that poses a threat to life or bodily function	Extensive Any 2 of the following: -3 order, tests performed, or additional documents analyzed -Independent interpretation - address physician - address physician - address physician - address physician	High risk of mochility from collinear discussion teaching or treatment. Examples: "Dough stracty receipting learning was noticity of taxisity "Sociation for electron mage reagery with identified polisate or procedure ink for compare was a strateging of "Sociation and to react a strateging and policy of the strateging and the strateging of poor programs."	NP: 60-74 mins EP: 40-54 mins

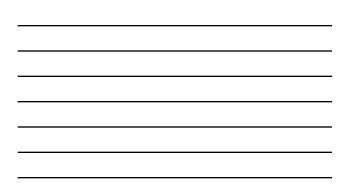
EXAMPLE #2: CHOOSE THE CODE, MEDICAL VISIT #3					
	CAPTURE		CARE		CODE

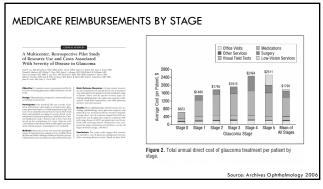




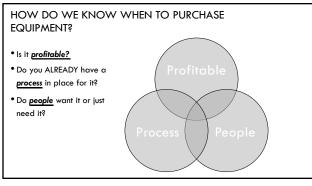
	Problems	Data	Risk	Time
99202 99212	•1 Self-limited or minor problem	Minimal Minimal (< 2) or no orders, tests performed, or odditional documents analyzed	Minimal Minimal risk of morbidity from additional diagnostic testing or treatment	NP:15-29 mins EP: 10-19 mins
	Low 2 or more self-limited or minor problems; or 1 stoble chronic illness; or 1 scote, uncomplicated illness or injury	Limited -2 orders, tests performed, or additional documents analyzed, or -assessment requiring an independent historian	Low risk of morbidity from additional diagnostic testing or readment. Example: •OTC medication	NP: 30-45 mins EP: 20-29 mins
	Moderate 1 or more chronic illessase with excertbalitis, programs, or side effects of reatment; or 2 or more table chronic illnessas; or 1 undigonseid new problem with uncertain propositi; or 1 acte illness with systemic symptom; or 1 acte complicated injury	Any 1 of the following conditional *3 orders, with performed, a ordditional disommets analyzed *1dopandenti interpretation of a test performed by conther physician *Discusion of management or test interpretation with external physician	Moderose rike of mohiding from editional disposite testing or tractmere. Examples: "Prescription degenerations of the edition of the edition "Decision regarding millers surgery with identified patient or "Decision regarding mejer surgery without identified patient or procedure risk factors." "Decision regarding mejer surgery without identified patient or procedure risk factors." "Decision is returned significantly limited by social disterminant of branch	NP: 45-59 mins EP: 30-39 mins
	 I or more chance illusiass with severe excorrbation, progression, or side effects of treatment; or 1 ocate or chance illuses or injury that poses a threat to life or badily function 	Extensive Any 2 of the following: -3 orders, tests performed, or additional documents analyzed -independent interpretation of a test performed by conther physician -Discussion of management or test interpretation with external physician	High rike of morbidity from additional disapositic tearing or treatment. Examples: "Doug theory requiring benetive monotoring for taxicity "Dockino for electron major surgery with identified position or procedure risk for taxicity and the surgery "Dockino for emerging taxigery "Dockino for emerging taxigery "Dockino for emerging taxigery "Dockino for emerging taxigery to procedure risk to essections are because of proor programs."	NP: 60-74 mins EP: 40-54 mins

EXAMPLE #2: REVENUE PER OD HOUR				
Exam	Time	Services	Fees (Medicare)	
2 Week F/U	30 minutes	99214, 92083, 92132, 76514, 92020	\$130, \$64, \$37, \$12, \$28	
3 Month GLC eval	30 minutes	99214, 92132, 92083	\$130, \$37, \$64	
3 Month GLC eval	15 minutes	92012/99213, 92083	\$91, \$64	
	\$1179 - \$	\$1479 / 2.75 HOU	RS = \$428 - \$537	

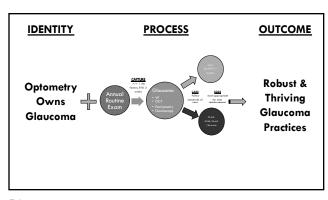














	KEY POINTS		
	Beliefs underlie actions, actions reinforce beliefs	Capture \rightarrow Care \rightarrow Cade = Continuous practice growth	Adhere to standards of care and document accordingly
52			

QUESTIONS?

Email me at kdklute@gmail.com