

**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.



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#### **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.

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# OPTOMETRISTS SHOULD OWN CHRONIC GLAUCOMA MANAGEMENT

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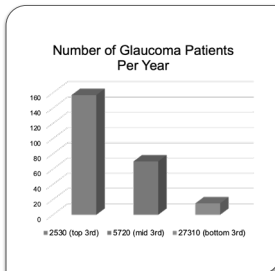
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## OD GLAUCOMA PRESCRIBING DATA

- ~10,000 ODs in the US **never wrote** a glaucoma Rx in 2017!
- ~ 6.7% of ODs write 50% of glaucoma Rx's
- **37% of ODs write < 5 glaucoma Rx/yr**

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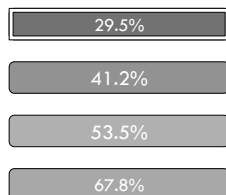
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## HOW MUCH ARE ODS MANAGING WITH VF?

What percentage of O.D.'s billed Medicare for a visual field in 2019?



Source: Richard Edlow, OD "The Eyeconomist"

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### HOW MUCH ARE ODS MANAGING WITH OCT?

What percentage of  
O.D.'s billed  
Medicare for an OCT  
in 2019?

10.5%

19.2%

27.0%

44.5%

Source: Richard Edlow, OD "The Eyeconomist"

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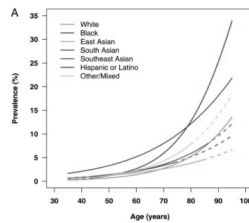


FIGURE 1. Estimated prevalence (%) of primary open-angle glaucoma with age for men and women combined by ethnicity. Colored lines come from regression models adjusting for age, fitted separately for different ethnicities. Solid lines are given across the age range of available data for each ethnic group.

Adapted from Kapetanakis V, Chan M, Foster P, et al. Global variations and time trends in the prevalence of primary open angle glaucoma (POAG): a systematic review and meta analysis. *Br J Ophthalmol*. 2016 Jan;100(1):86-93.

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### 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

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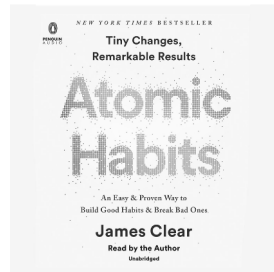
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### THREE LAYERS OF BEHAVIORAL CHANGE

- Identity (Why)
- Process (How)
- Outcome (What)




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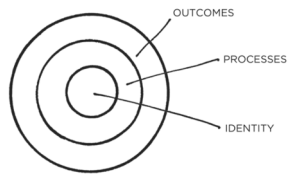
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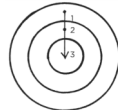
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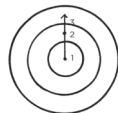
### INSIDE OUT VS. OUTSIDE IN



### OUTCOME-BASED HABITS



### IDENTITY-BASED HABITS




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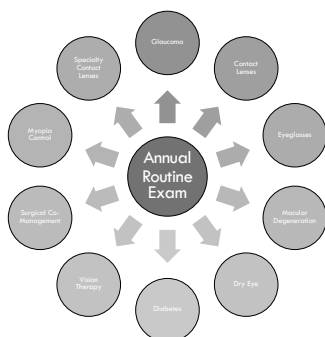
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### Total Patient Care Model




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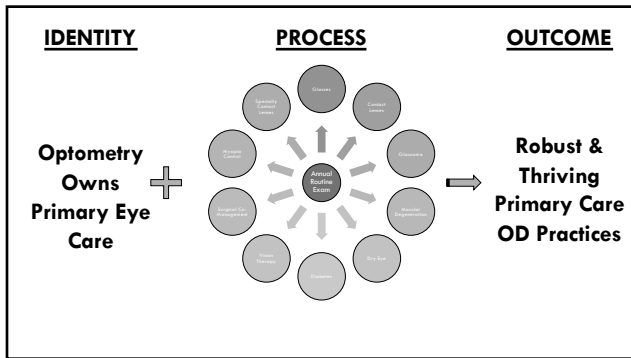
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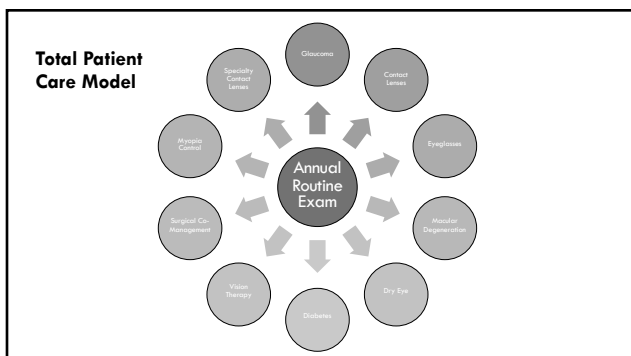
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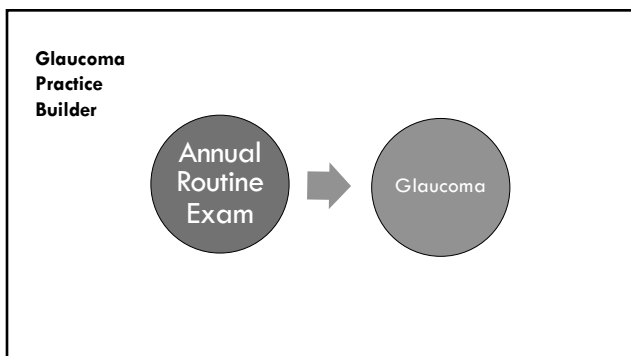
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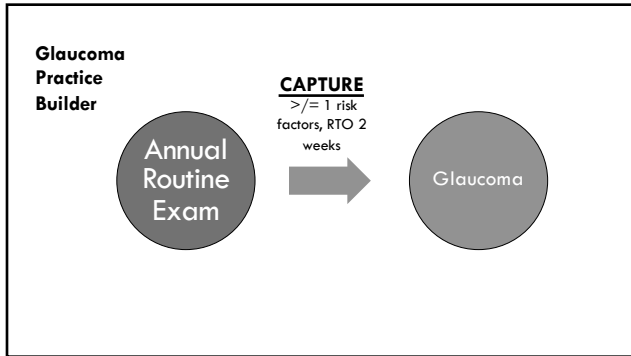
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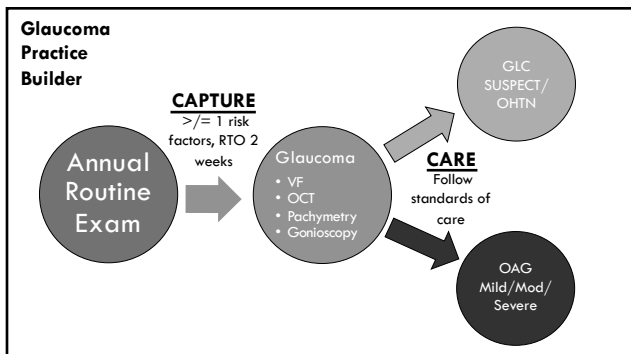
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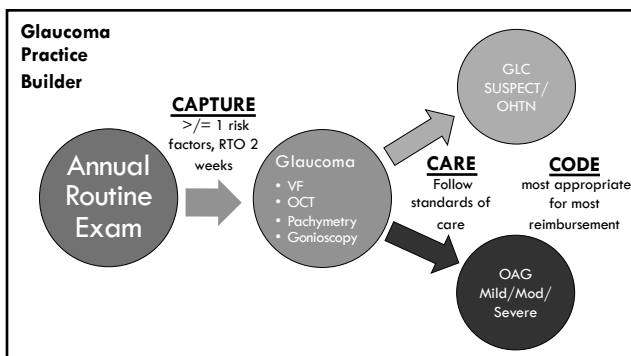
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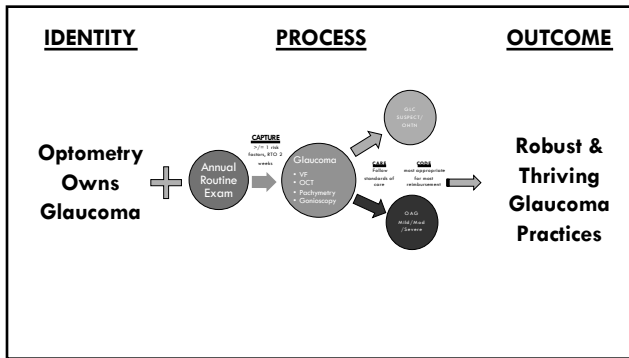
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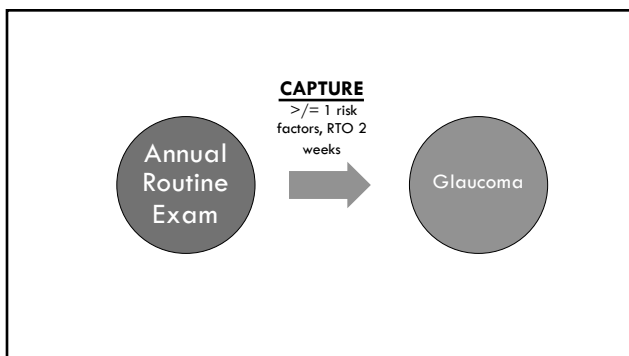
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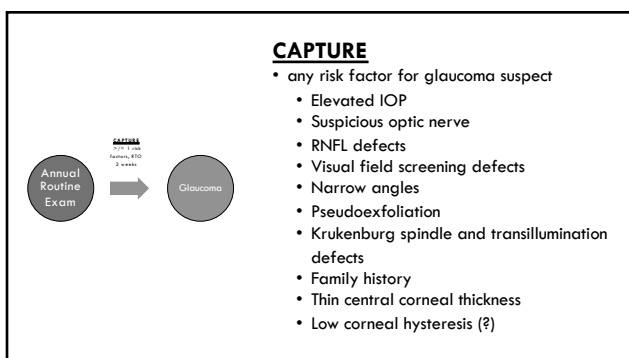
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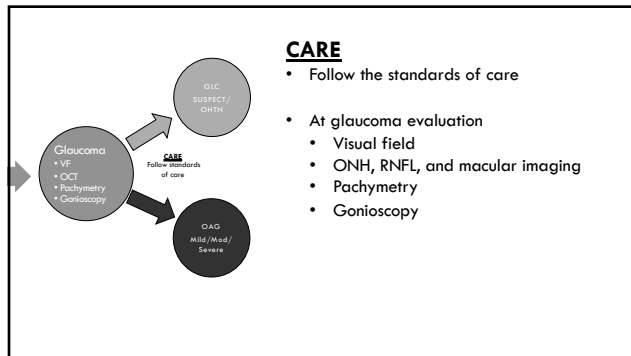
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OAG Suspect Low risk	OAG Suspect High Risk	POAG Mild	POAG Moderate	POAG Severe	PACS	PAC	PACG
H40.01x 1-2 risk factors	H40.02x 3 or more risk factors	H40.11x2 Optic disc, RNFL, and/or macular imaging abnormalities consistent with glaucoma AND NO visual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

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	Gonioscopy	Pachymetry	Dilated ONH/RNFL assessment	ONH and macular imaging	Visual Fields
OHTN	Annually <sup>1</sup>	Initial eval only	Annually <sup>1</sup>	Annually	Annually
Glaucoma Suspect	Annually <sup>1</sup>	Initial eval only	Annually <sup>1</sup>	Annually	Annually
Mild Glaucoma, Stable	Annually <sup>1</sup>	Initial eval only	Annually <sup>1</sup>	Annually	Annually
Mild Glaucoma, Unstable <sup>3</sup>	Annually <sup>1</sup>	Initial eval only	Annually <sup>1</sup>	Annually or repeated each time changes occur	Annually or repeated each time changes occur
Moderate Glaucoma, Stable	Annually <sup>1</sup>	Initial eval only	Annually <sup>1</sup>	Every 6-12 months	Every 6-12 months
Moderate Glaucoma, Unstable <sup>3</sup>	Annually <sup>1</sup>	Initial eval only	Annually <sup>1</sup>	Every 6-12 months or repeated each time changes occur	Every 6-12 months or repeated each time changes occur
Severe Glaucoma, Stable	Annually <sup>1</sup>	Initial eval only	Annually <sup>1</sup>	Every 4-8 months <sup>2</sup>	Every 4-8 months
Severe Glaucoma, Unstable <sup>3</sup>	Annually <sup>1</sup>	Initial eval only	Annually <sup>1</sup>	Every 4-8 months or repeated each time changes occur <sup>2</sup>	Every 4-8 months or repeated each time changes occur

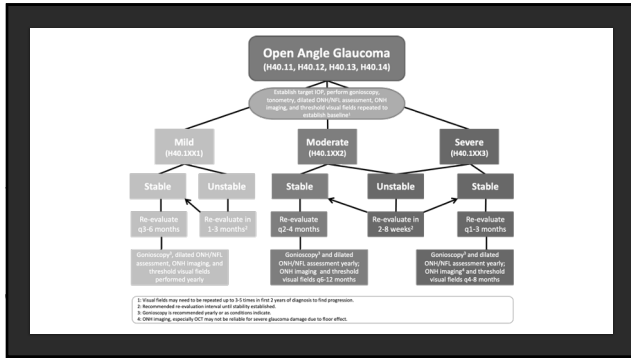
<sup>1</sup>: Or as conditions indicate

<sup>2</sup>: ONH imaging, especially OCT may not be reliable to monitor severe glaucoma due to "floor effect"

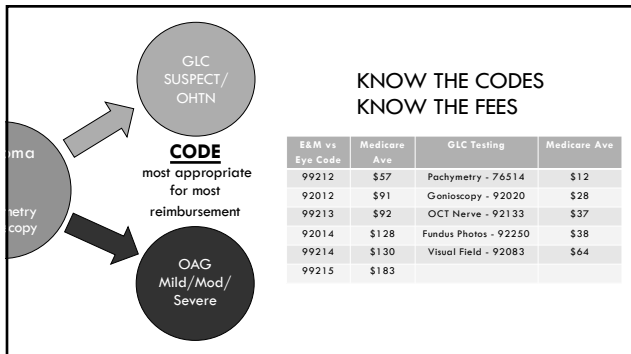
<sup>3</sup>: Unstable is defined as target IOP not being met and/or visual field progression and/or ONH changes

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	Problems	Data	Risk	Time
99202 99212	<b>Minimal</b> *1 Self-limited or minor problem	<b>Minimal</b> *Minimal (< 2) or no orders, tests performed, or additional documents analyzed	<b>Minimal</b> Minimal risk of morbidity from additional diagnostic testing or treatment	NP: 15-29 mins EP: 10-19 mins
99203 99213	<b>Low</b> *2 or more self-limited or minor problems, or *1 stable chronic illness, or *1 acute, uncomplicated illness or injury	<b>Limited</b> *2 orders, tests performed, or additional documents analyzed, or *assessment requiring an independent historian	<b>Low</b> Low risk of morbidity from additional diagnostic testing or treatment. Example: *OTC medication	NP: 30-45 mins EP: 20-29 mins
99204 99214	<b>Moderate</b> *1 or more chronic illnesses with exacerbation, progression, or side effects of treatment, or *2 or more stable chronic illnesses, or *1 undiagnosed new problem with uncertain prognosis, or *1 acute illness with systemic symptoms, or *1 acute complicated injury	<b>Moderate</b> Any 1 of the following: *3 orders, tests performed, or additional documents analyzed *Independent interpretation of a test performed by another physician *Discussion of management or test interpretation with external physician	<b>Moderate</b> Moderate risk of morbidity from additional diagnostic testing or treatment. Examples: *Prescription drug medication *Decision regarding minor surgery with identified patient or procedure risk factors *Decision regarding major surgery without identified patient or procedure risk factors *Diagnosis or treatment significantly limited by social determinants of health	NP: 45-59 mins EP: 30-39 mins
99205 99215	<b>High</b> *1 or more chronic illnesses with severe exacerbation, progression, or side effects of treatment, or *1 acute or chronic illness or injury that poses a threat to life or bodily function	<b>Extensive</b> Any 2 of the following: *3 orders, tests performed, or additional documents analyzed *Independent interpretation of a test performed by another physician *Discussion of management or test interpretation with external physician	<b>High</b> High risk of morbidity from additional diagnostic testing or treatment. Examples: *Drug therapy requiring intensive monitoring for toxicity *Decision for elective major surgery with identified patient or procedure risk factors *Decision for emergency major surgery *Decision regarding hospitalization *Decision not to resuscitate or to deescalate care because of poor prognosis	NP: 60-74 mins EP: 40-54 mins

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## EXAMPLE #1: CHOOSE THE CODE

CAPTURE

CARE

CODE

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	Problems	Data	Risk	Time
99202 99212	<b>Minimal</b> • 1 self-limited or minor problem	<b>Minimal</b> • Minimal (< 2) or no orders, tests performed, or additional documents analyzed	<b>Minimal</b> Minimal risk of morbidity from additional diagnostic testing or treatment	NP: 15-29 min EP: 10-19 min
99203 99213	<b>Low</b> • 2 or more self-limited or minor problems; or • 1 stable chronic illness; or • 1 acute, uncomplicated illness or injury	<b>Limited</b> • 2 orders, tests performed, or additional documents analyzed, or • Assessment requiring an independent historian	<b>Low</b> Low risk of morbidity from additional diagnostic testing or treatment. Example: • OTC medication	NP: 30-45 min EP: 20-29 min
99204 99214	<b>Moderate</b> • 1 or more chronic illnesses with exacerbation, progression, or side effects of treatment; or • 2 or more stable chronic illnesses; or • 1 undiagnosed new problem with uncertain prognosis; or • 1 acute illness with systemic symptoms; or • 1 acute complicated injury	<b>Moderate</b> Any 1 of the following: • 3 orders, tests performed, or additional documents analyzed • Independent interpretation of a test performed by another physician • Discussion of management or test interpretation with external physician	<b>Moderate</b> Moderate risk of morbidity from additional diagnostic testing or treatment. Examples: • Prescription drug medication • Decision regarding minor surgery with identified patient or procedure risk factors • Decision regarding major surgery without identified patient or procedure risk factors • Diagnosis or treatment significantly limited by social determinants of health	NP: 45-59 min EP: 30-39 min
99205 99215	<b>High</b> • 1 or more chronic illnesses with severe exacerbation, progression, or side effects of treatment; or • 1 acute or chronic illness or injury that poses a threat to life or bodily function	<b>Extensive</b> Any 3 of the following: • 3 orders, tests performed, or additional documents analyzed • Independent interpretation of a test performed by another physician • Discussion of management or test interpretation with external physician	<b>High</b> High risk of morbidity from additional diagnostic testing or treatment. Examples: • Drug therapy requiring intensive monitoring for toxicity • Decision for elective major surgery with identified patient or procedure risk factors • Decision for emergency major surgery • Decision regarding hospitalization • Decision not to resuscitate or to deescalate care because of poor prognosis	NP: 60-74 min EP: 40-54 min

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## 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

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## 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

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	92002	92012	92004	92014
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

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## CARE

	92002	92012	92004	92014
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

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

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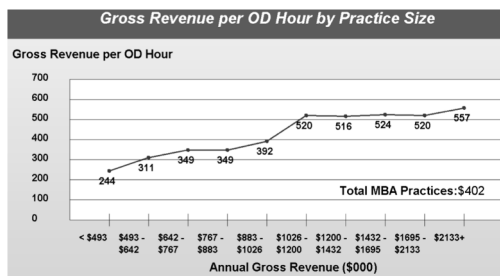
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	Problems	Data	Risk	Time
99202 99212	<b>Minimal</b> • 1 self-limited or minor problem	<b>Minimal</b> • Minimal (< 2) or no orders, tests performed, or additional documents analyzed	<b>Minimal</b> Minimal risk of morbidity from additional diagnostic testing or treatment	NP: 15-29 mins EP: 10-19 mins
99203 99213	<b>Low</b> • 2 or more self-limited or minor problems; or • 1 stable chronic illness; or • 1 acute, uncomplicated illness or injury	<b>Limited</b> • >2 orders, tests performed, or additional documents analyzed; or • Assessment requiring an independent historian	<b>Low</b> Low risk of morbidity from additional diagnostic testing or treatment. Example: • OTC medication	NP: 30-45 mins EP: 20-29 mins
99204 99214	<b>Moderate</b> • 1 or more chronic illnesses with exacerbation, progression, or side effects of treatment; or • 2 or more stable chronic illnesses; or • 1 undiagnosed new problem with uncertain prognosis; or • 1 acute illness with systemic symptoms; or • 1 acute complicated injury	<b>Moderate</b> Any 1 of the following: • >3 orders, tests performed, or additional documents analyzed • Independent interpretation of a test performed by another physician • Discussion of management or test interpretation with external physician	<b>Moderate</b> Moderate risk of morbidity from additional diagnostic testing or treatment. Examples: • Prescription drug medication • Decision regarding minor surgery with identified patient or procedure risk factors • Decision regarding major surgery without identified patient or procedure risk factors • Diagnosis or treatment significantly limited by social determinants of health	NP: 45-59 mins EP: 30-39 mins
99205 99215	<b>High</b> • 1 or more chronic illnesses with severe exacerbation, progression, or side effects of treatment; or • 1 acute or chronic illness or injury that poses a threat to life or bodily function	<b>Extensive</b> Any 2 of the following: • >3 orders, tests performed, or additional documents analyzed • Independent interpretation of a test performed by another physician • Discussion of management or test interpretation with external physician	<b>High</b> High risk of morbidity from additional diagnostic testing or treatment. Examples: • Drug therapy requiring intensive monitoring for toxicity • Decision for elective major surgery with identified patient or procedure risk factors • Decision regarding emergency major surgery • Decision regarding hospitalization • Decision not to resuscitate or to deescalate care because of poor prognosis	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
$\$700 - \$1000 / 1.75 \text{ HOURS} = \$400 - \$571$			

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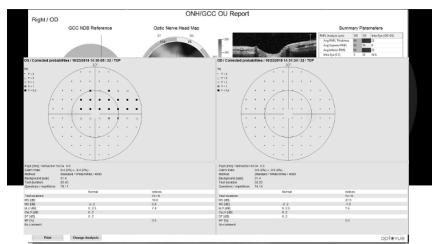
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EXAMPLE #2: CHOOSE THE CODE

CAPTURE




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EXAMPLE #2: CHOOSE THE CODE

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	Problems	Data	Risk	Time
99202 99212	•1 Self-limited or minor problem <b>Minimal</b>	•Minimal (< 2) or no orders, tests performed, or additional documents analyzed <b>Minimal</b>	Minimal risk of morbidity from additional diagnostic testing or treatment <b>Minimal</b>	NP: 15-29 mins EP: 10-19 mins
99203 99213	•2 or more self-limited or minor problems; or •1 stable chronic illness; or •1 acute, uncomplicated illness or injury <b>Low</b>	•2 orders, tests performed, or additional documents analyzed, or •Assessment requiring an independent historian <b>Limited</b>	Low risk of morbidity from additional diagnostic testing or treatment. Example: •OTC medication <b>Low</b>	NP: 30-45 mins EP: 20-39 mins
99204 99214	•1 or more chronic illnesses with exacerbation, progression, or side effects of treatment; or •2 or more stable chronic illnesses; or •1 undiagnosed new problem with uncertain prognosis; or •1 acute illness with systemic symptoms; or •1 acute complicated injury <b>Moderate</b>	Any 1 of the following: •3 orders, tests performed, or additional documents analyzed •Independent interpretation of a test performed by another physician •Discussion of management or test interpretation with external physician <b>Moderate</b>	Moderate risk of morbidity from additional diagnostic testing or treatment. Examples: •Prescription drug medication •Decision regarding minor surgery with identified patient or procedure risk factors •Decision regarding major surgery without identified patient or procedure risk factors •Diagnosis or treatment significantly limited by social determinants of health <b>Moderate</b>	NP: 45-59 mins EP: 30-39 mins
99205 99215	•1 or more chronic illnesses with severe exacerbation, progression, or side effects of treatment; or •1 acute or chronic illness or injury that poses a threat to life or bodily function <b>High</b>	Any 2 of the following: •3 orders, tests performed, or additional documents analyzed •Independent interpretation of a test performed by another physician •Discussion of management or test interpretation with external physician <b>Extensive</b>	High risk of morbidity from additional diagnostic testing or treatment. Examples: •Drug therapy requiring intensive monitoring for toxicity •Decision for elective major surgery with identified patient or procedure risk factors •Decision for emergency major surgery •Decision regarding hospitalization •Decision not to resuscitate or to deescalate care because of poor prognosis <b>High</b>	NP: 60-74 mins EP: 40-54 mins

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

CAPTURE

CARE

CODE

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

CAPTURE

CARE

CODE

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

CAPTURE

CARE

CODE

Table 2. Setting Treatment 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; OAG = open-angle glaucoma; OHT = ocular hypertension.

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	Problems	Data	Risk	Time
99202 99212	<b>Minimal</b> •1 self-limited or minor problem	<b>Minimal</b> •Minimal (< 2) or no orders, tests performed, or additional documents analyzed	<b>Minimal</b> Minimal risk of morbidity from additional diagnostic testing or treatment	NP: 15-29 mins EP: 10-19 mins
99203 99213	<b>Low</b> •2 or more self-limited or minor problems; or •1 stable chronic illness or •1 acute, uncomplicated illness or injury	<b>Limited</b> •2 orders, tests performed, or additional documents analyzed, or •Assessment requiring an independent historian	<b>Low</b> Low risk of morbidity from additional diagnostic testing or treatment. Example: •OTC medication	NP: 30-45 mins EP: 20-29 mins
99204 99214	<b>Moderate</b> •1 or more chronic illnesses with exacerbation, progression, or side effects of treatment; or •2 or more stable chronic illnesses; or •1 undiagnosed new problem with uncertain prognosis; or •1 acute illness with systemic symptoms; or •1 acute complicated injury	<b>Moderate</b> Any 1 of the following: •3 orders, tests performed, or additional documents analyzed •Independent interpretation of a test performed by another physician •Discussion of management or test interpretation with external physician	<b>Moderate</b> Moderate risk of morbidity from additional diagnostic testing or treatment. Examples: •Prescription drug medication •Decision regarding minor surgery with identified patient or procedure risk factors •Decision regarding major surgery without identified patient or procedure risk factors •Diagnosis or treatment significantly limited by social determinants of health	NP: 45-59 mins EP: 30-39 mins
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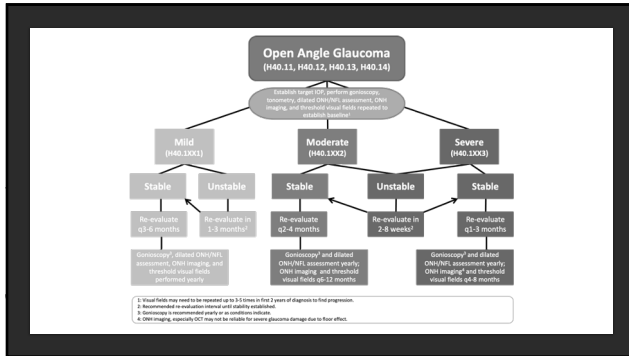
## EXAMPLE #2: CHOOSE THE CODE, MEDICAL VISIT #3

CAPTURE

CARE

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	Problems	Data	Risk	Time
99202 99212	<b>Minimal</b> • 1 Self-limited or minor problem	<b>Minimal</b> • Minimal (< 2) or no orders, tests performed, or additional documents analyzed	<b>Minimal</b> Minimal risk of morbidity from additional diagnostic testing or treatment	NP: 15-29 mins EP: 10-19 mins
99203 99213	<b>Low</b> • 2 or more self-limited or minor problems; or • 1 stable chronic illness; or • 1 acute, uncomplicated illness or injury	<b>Limited</b> • 2 orders, tests performed, or additional documents analyzed, or • Assessment requiring an independent historian	<b>Low</b> Low risk of morbidity from additional diagnostic testing or treatment. Example: • OTC medication	NP: 30-45 mins EP: 20-29 mins
99204 99214	<b>Moderate</b> • 1 or more chronic illnesses with exacerbation, progression, or side effects of treatment; or • 2 or more stable chronic illnesses; or • 1 undiagnosed new problem with uncertain prognosis; or • 1 acute illness with systemic symptoms; or • 1 acute complicated injury	<b>Moderate</b> Any 1 of the following: • 3 orders, tests performed, or additional documents analyzed • Independent interpretation of a test performed by another physician • Discussion of management or test interpretation with external physician	<b>Moderate</b> Moderate risk of morbidity from additional diagnostic testing or treatment. Examples: • Prescription drug medication • Decision regarding minor surgery with identified patient or procedure risk factors • Decision regarding major surgery without identified patient or procedure risk factors • Diagnosis or treatment significantly limited by social determinants of health	NP: 45-59 mins EP: 30-39 mins
99205 99215	<b>High</b> • 1 or more chronic illnesses with severe exacerbation, progression, or side effects of treatment; or • 1 acute or chronic illness or injury that poses a threat to life or bodily function	<b>Extensive</b> Any 3 of the following: • 3 orders, tests performed, or additional documents analyzed • Independent interpretation of a test performed by another physician • Discussion of management or test interpretation with external physician	<b>High</b> High risk of morbidity from additional diagnostic testing or treatment. Examples: • Drug therapy requiring intensive monitoring for toxicity • Decision for elective major surgery with identified patient or procedure risk factors • Decision for emergency major surgery • Decision regarding hospitalization • Decision not to resuscitate or to deescalate care because of poor prognosis	NP: 60-74 mins EP: 40-54 mins

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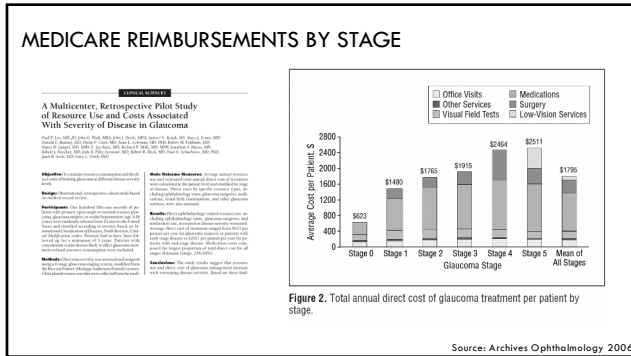
**EXAMPLE #2: REVENUE PER OD HOUR**

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

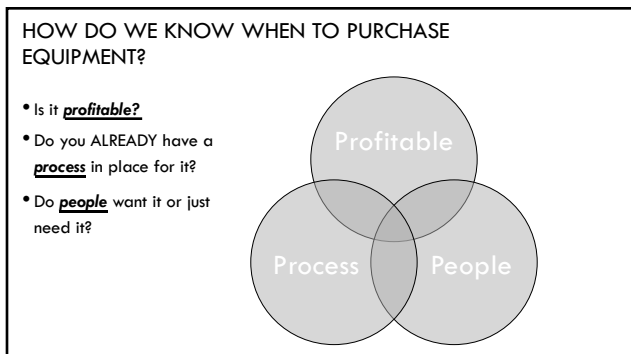
**\$1179 - \$1479 / 2.75 HOURS = \$428 - \$537**

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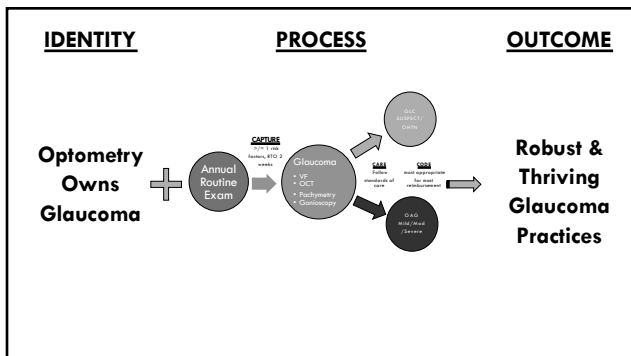




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## KEY POINTS



Beliefs underlie actions,  
actions reinforce beliefs



Capture → Care → Code =  
Continuous practice growth



Adhere to standards of care  
and document accordingly

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## QUESTIONS?

Email me at [kdklute@gmail.com](mailto:kdklute@gmail.com)

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