

**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

2

CHOOSE THE RIGHT CODE

DOCUMENTATION GUIDELINES FOR OFFICE VISITS

KYLE D KLUTE, OD, FAAO

3

OPTOMETRISTS OWN PRIMARY EYE CARE

4

WHAT IS PRIMARY EYE CARE?

"Primary eye care is the provision of appropriate, accessible, and affordable care that meets patients' eye care needs in a comprehensive and competent manner"

5

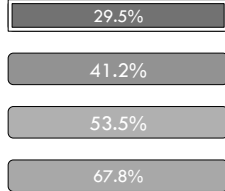
WHAT IS PRIMARY EYE CARE?

- Educating patients about maintaining and promoting healthy vision.
- Performing a comprehensive examination of the visual system.
- Screening for eye diseases and conditions affecting vision that may be asymptomatic.
- Recognizing ocular manifestations of systemic diseases and systemic effects of ocular medications.
- Making a differential diagnosis and definitive diagnosis for any detected abnormalities.
- Performing refractions.
- Fitting and prescribing optical aids, such as glasses and contact lenses.
- Deciding on a treatment plan and treating patients' eye care needs with appropriate therapies.
- Counseling and educating patients about their eye disease conditions.
- Recognizing and managing local and systemic effects of drug therapy.
- Determining when to triage patients for more specialized care and referring to specialists as needed and appropriate.
- Coordinating care with other physicians involved in the patient's overall medical management.
- Performing surgery when necessary.

6

HOW MUCH ARE ODS MANAGING...THE REST?

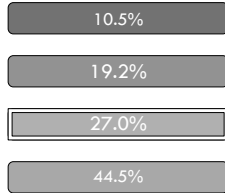
What percentage of
O.D.'s billed
Medicare for a visual
field in 2019?



7

HOW MUCH ARE ODS MANAGING...THE REST?

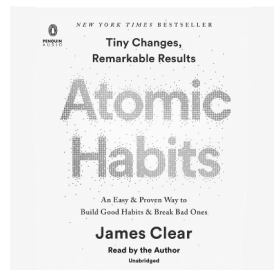
What percentage of
O.D.'s billed
Medicare for an OCT
in 2019?



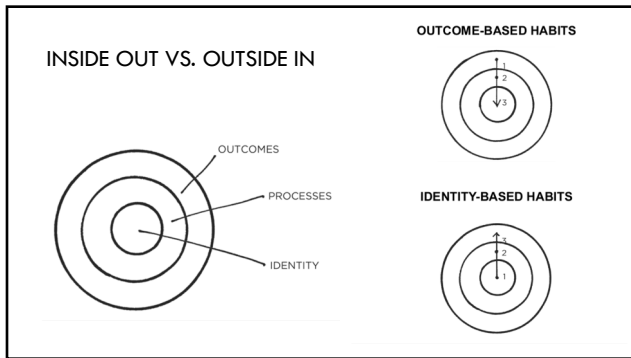
8

THREE LAYERS OF BEHAVIORAL CHANGE

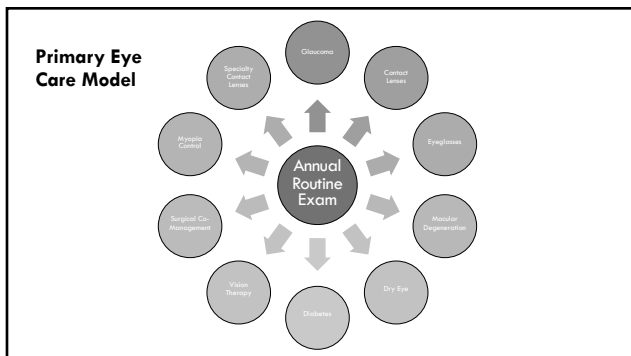
- Identity (Why)
- Process (How)
- Outcome (What)



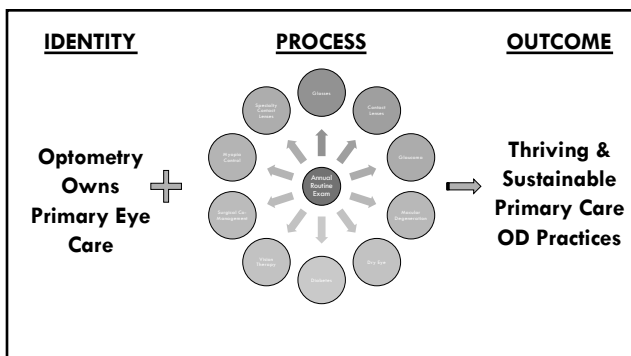
9



10



11



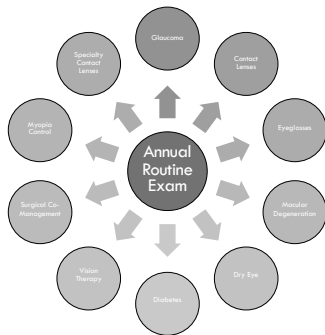
12

I THOUGHT THIS WAS A CODING LECTURE. WHERE ARE YOU GOING WITH THIS?



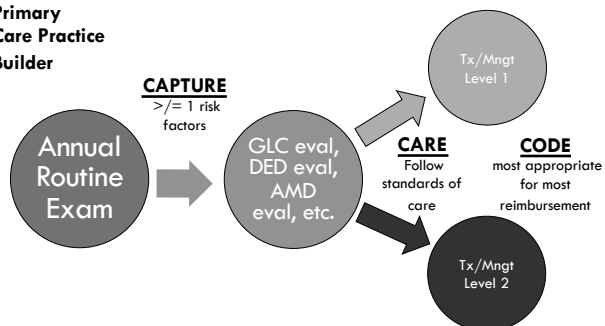
13

Primary Eye Care Model

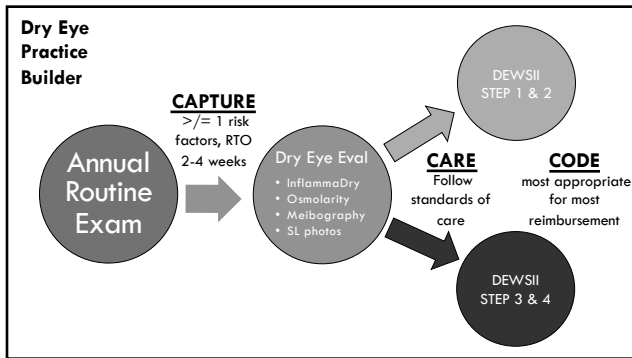


14

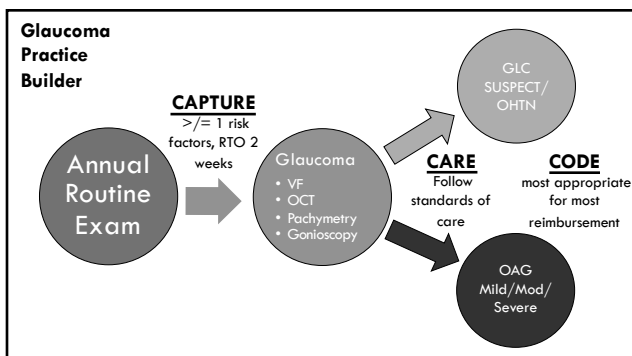
Primary Care Practice Builder



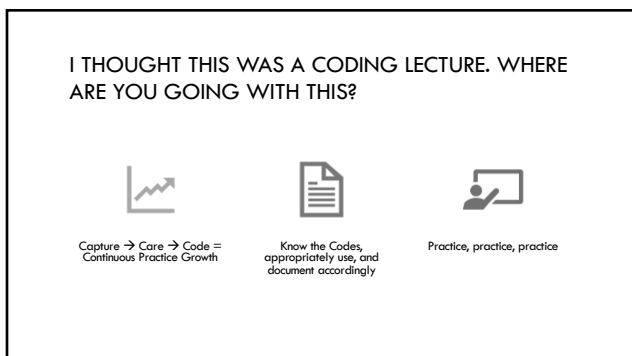
15




16



17



18



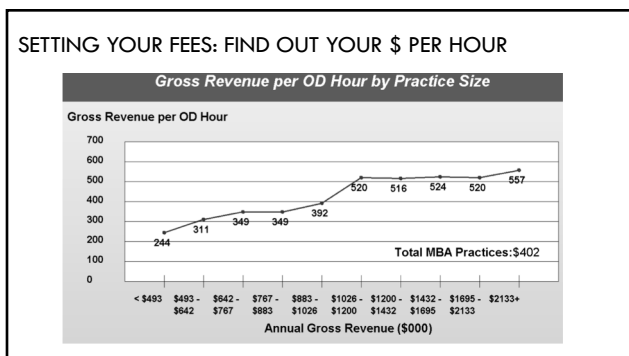
**Know the Codes,
appropriately use,
and document
accordingly**

SET YOUR FEES

KNOW 92 vs 99

ORDER TESTS & PROCEDURES

19



20

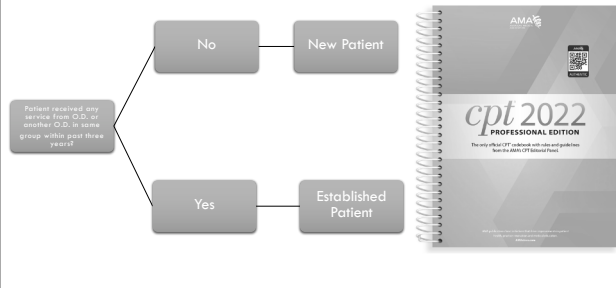
SETTING YOUR FEES

	Payer 1	Payer 2	Payer 3	Your Fees
92002	100	105	85	?
92012	85	90	75	?
92004	140	150	135	?
92014	125	135	100	?
99202	125	135	115	\$
99203	165	185	155	\$

- Perform this yearly
- Don't "miss out" on revenue
- Each Code One Fee

21

KNOW 92 VS 99: NEW VS. ESTABLISHED



22

920X2 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

23

920X4 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

24

	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

25

	Problems	Data	Risk	Time
99202	Minimal • 1 Self-limited or minor problem	Minimal • 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
99212	Low • 2 or more self-limited or minor problems; or • 1 stable chronic illness; or • 1 acute, uncomplicated illness or injury	Limited • 2 orders, tests performed, or additional documents analyzed, or • Assessment requiring an independent historian	Low Low risk of morbidity from additional diagnostic testing or treatment. Examples: • OTC medication	NP: 30-45 mins EP: 20-29 mins
99203	Moderate • 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	Moderate 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	Moderate 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
99204				
99214				
99205	High • 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	Extensive 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	High 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
99215				

26

KEY POINTS TO REMEMBER ABOUT TIME

- "Total time on the date of the encounter"
 - "Includes both face-to-face and non face-to-face time personally spent by the physician"
 - Preparing to see the patient (reviewing tests)
 - Obtaining and/or reviewing separately obtained history
 - Performing examination
 - Counseling and educating the patient/family/caregiver
 - Ordering medications, tests, or procedures
 - Referring and communicating with other health care professionals (when not separately reported)
 - Documenting clinical information in the electronic or other health record

27

KEY POINTS TO REMEMBER ABOUT TIME

- Time does **NOT** include:
 - Special testing and/or procedures separately reported
 - Examples:
 - Time spent performing visual fields, OCT, etc.
 - Time spent performing procedures
- If it has a CPT code, don't include it

28

KEY POINTS TO REMEMBER ABOUT E/M CODES

- Medical necessity
 - ALL LEVELS STILL REQUIRE: "a medically appropriate history and/or examination"
- 2 of 3 elements of the level must be met or exceeded

29

	Problems	Data	Risk	Time
99202 99212	Minimal • 1 Self-limited or minor problem	Minimal • 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
99203 99213	Low • 2 or more self-limited or minor problems, or • 1 stable chronic illness, or • 1 undiagnosed new problem with uncertain prognosis, or • 1 acute, uncomplicated illness or injury	Limited • 2 orders, tests performed, or additional documents analyzed, or • Assessment requiring an independent historian	Low Low risk of morbidity from additional diagnostic testing or treatment. Example: • OTC medication	NP: 30-45 mins EP: 20-29 mins
99204 99214	Moderate • 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	Intermediate 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	Moderate 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 • Decision regarding hospitalization • Diagnosis or treatment significantly limited by social determinants of health	NP: 45-59 mins EP: 30-39 mins
99205 99215	High • 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	Extensive 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	High 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 discontinue care because of poor prognosis	NP: 60-74 mins EP: 40-54 mins

30

KEY POINTS TO REMEMBER ABOUT MDM: <i>PROBLEMS</i>		Problems	
Number of diagnoses and management options	Number and complexity of problems addressed	99202	Minimal
		99212	• 1 Self-limited or minor problem
			Low
		99203	• 2 or more self-limited or minor problems; or
		99213	• 1 stable chronic illness; or • 1 acute, uncomplicated illness or injury
			Moderate
		99204	• 1 or more chronic illnesses with exacerbation, progression, or side effects of treatment; or
		99214	• 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
			High
		99205	• 1 or more chronic illnesses with severe exacerbation, progression, or side effects of treatment; or
		99215	• 1 acute or chronic illness or injury that poses a threat to life or bodily function

31

KEY POINTS TO REMEMBER ABOUT MDM: <i>PROBLEMS</i>	
Self-limited or minor problem	<p>AMA Def: A problem that runs a definite and prescribed course, is transient in nature, and is not likely to permanently alter health status</p> <p>Example:</p> <ul style="list-style-type: none"> • Conjunctival hemorrhage

32

KEY POINTS TO REMEMBER ABOUT MDM: <i>PROBLEMS</i>	
Chronic illness	<p>AMA Def: A problem with an expected duration of at least a year or until the death of a patient...the risk of morbidity without treatment is significant...diabetes, cataract,...</p> <p>Examples:</p> <ul style="list-style-type: none"> • Glaucoma, dry eye • Stable? Unstable?

33

KEY POINTS TO REMEMBER ABOUT MDM: *PROBLEMS*

Acute illness or
injury,
uncomplicated

AMA Def: A **recent or new short-term problem with low risk of morbidity**. Full recovery expected.
Examples:
• Corneal abrasion, RCE, viral conjunctivitis
• Did the illness cause systemic symptoms?
• Did the injury cause damage to other systems?
• Could the injury pose a threat to life or bodily function? (i.e. blindness)

34

KEY POINTS TO REMEMBER ABOUT
MDM: *PROBLEMS*

Number and
complexity of
problems addressed

Problems	
99202 99212	Minimal • 1 Self-limited or minor problem
99203 99213	Low • 2 or more self-limited or minor problems; or • 1 stable chronic illness; or • 1 acute, uncomplicated illness or injury
99204 99214	Moderate • 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
99205 99215	High • 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

35

KEY POINTS TO REMEMBER ABOUT
MDM: *DATA*

- Includes 3 categories:
 - Tests, documents, orders or independent historians
 - Independent interpretation of tests
 - Discussion of management or test interpretation with external physician or other qualified health professional

Data	
99202 99212	Minimal • Minimal (< 2) or no orders, tests performed, or additional documents analyzed
99203 99213	Low • 2 orders, tests performed, or additional documents analyzed; or • Assessment requiring an independent historian
99204 99214	Moderate 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
99205 99215	Substantial 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

36

KEY POINTS TO REMEMBER ABOUT MDM: DATA		Data
<ul style="list-style-type: none"> Does NOT include: <ul style="list-style-type: none"> When the physician or other qualified health care professional is reporting a separate CPT code that includes an interpretation and report, the interpretation and report should not count toward MDM 	99202	Minimal
	99212	*Minimal (< 2) or no orders, tests performed, or additional documents analyzed
	99203	Low
	99213	*2 orders, tests performed, or additional documents analyzed, or *assessment requiring an independent historian
	99204	Moderate
	99214	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
	99205	Extensive
	99215	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

37

KEY POINTS TO REMEMBER ABOUT MDM: DATA		Data
<ul style="list-style-type: none"> In other words... <ul style="list-style-type: none"> Data <i>includes or counts</i> tests with a CPT code But NOT CPT tests that are separately interpreted, reported, and billed. Examples: <ul style="list-style-type: none"> DOES NOT include visual field 92083 DOES include gonioscopy DOES include CBC w/diff, but only as one test (one CPT code) 	99202	Minimal
	99212	*Minimal (< 2) or no orders, tests performed, or additional documents analyzed
	99203	Low
	99213	*2 orders, tests performed, or additional documents analyzed, or *assessment requiring an independent historian
	99204	Moderate
	99214	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
	99205	Extensive
	99215	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

38

KEY POINTS TO REMEMBER ABOUT MDM: RISK		Risk
<ul style="list-style-type: none"> Minimal: minimal risk for treatment or testing Low: very low risk of anything bad, minimal consent, discussion Moderate: review risks, obtain consent and monitor, or complex social factors in management High: need to discuss some pretty bad things that could happen for which physician or other qualified health care professional with monitor 	99202	Minimal
	99212	Minimal risk of morbidity from additional diagnostic testing or treatment. Examples:
	99203	Low
	99213	Low risk of morbidity from additional diagnostic testing or treatment. Example:
	99204	Moderate
	99214	Moderate risk of morbidity from additional diagnostic testing or treatment. Examples: *Prescription drug management *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
	99205	High
	99215	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 discontinue care because of poor prognosis

39

KEY POINTS TO REMEMBER ABOUT MDM: RISK

- Let's make it simple
 - Level 3: OTC Medication
 - Level 4: Prescription Medication
 - Minor surgery = global period < 90 days
 - Major surgery = global period 90 days
 - All "referred out" surgery
 - Level 5: anything at high risk for loss of vision whether monitoring or referring

Risk	
99202	Minimal risk of morbidity from additional diagnostic testing or treatment
99212	
99203	Low risk of morbidity from additional diagnostic testing or treatment. Example:
99213	
Moderate risk of morbidity from additional diagnostic testing or treatment. Examples:	
99204	•Prescription drug management
99214	•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
High risk of morbidity from additional diagnostic testing or treatment. Examples:	
99205	•Drug therapy requiring intensive monitoring for toxicity
99215	•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 discontinue care because of poor prognosis

40

HOW TO CHOOSE?

IS IT APPROPRIATE?

Does it maximize reimbursement?

41

HOW TO CHOOSE

NEW PT:

99202

99202

99203

99204

99204

99205

EST PT:

99212

99212

99213

99214

99214

99215

42

CASE #1: 72 YO, DECREASED VISION OU

VA: 20/40 OD, 20/50 OS

Pupils/EOM/CVF: normal OU

Manifest Refraction:

OD: -2.25-0.75x180 20/30++

OS: -2.50-1.00x175 20/30-

SLE: 2+telangiectasia UL/LL OU, mild

inspissation UL/LL OU, 2+cortical

cataracts OU, 2+NS cataract

Ophthalmoscopy: unremarkable OU

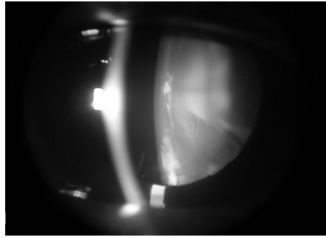


Image courtesy of eyeWiki.org

43

Problems	Data	Risk	Time
99202 99212 99203 99213	Minimal 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
99203 99213	Low 2 or more self-limited or minor problems; or 1 stable chronic illness; or 1 acute, uncomplicated illness or injury	Low Low risk of morbidity from additional diagnostic testing or treatment. Example: •OTC medication	NP: 30-45 mins EP: 20-29 mins
99203 99213	Moderate Any 1 of the following: •2 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	Moderate 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	High 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	High 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 not to resuscitate or to deescalate care because of poor prognosis	NP: 60-74 mins EP: 40-54 mins

44

CASE #2: 58 GLC SUSPECT CAPTURED FROM RECENT ANNUAL EXAM

• VA: 20/20 OD, 20/20 cc

• Pupils/EOM/CVF normal

• SLE: 2+inspissation OU

• IOP: 28/22 c GAT

• Dilated ophthalmoscopy:

• ONH: NRR healthy, 0.35/0.35

OD, 0.30/0.30 OS

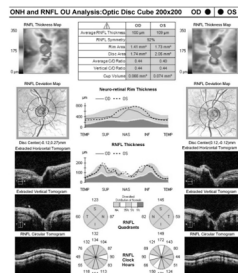
• Macular clear OU

• Vessels 0.7 OU

• Periphery: retina flat/intact

360 OU

• Special testing:



• OCT-N: normal RNFL OU

• VF 30-2: no glaucomatous defects OU.

• Pachys: 562/558

• Gonioscopy: open to CB all quadrants, minimal pigmentation

• No Fam Hx

45

CASE #2: 58 GLC SUSPECT CAPTURED FROM RECENT ANNUAL EXAM

CAPTURE	CARE	CODE
---------	------	------

46

	Problems	Data	Risk	Time
99202 99212	Minimal • 1 Self-limited or minor problem	Minimal • 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
99203 99213	Low • 2 or more self-limited or minor problems; or • 1 stable chronic illness; or • 1 acute, uncomplicated illness or injury	Limited • 2 orders, tests performed, or additional documents analyzed; or • Assessment requiring an independent historian	Low Low risk of morbidity from additional diagnostic testing or treatment. Example: • OTC medication	NP: 30-45 mins EP: 20-29 mins
99204 99214	Moderate • 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	Moderate 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	Moderate 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	High • 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	Extensive 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	High 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

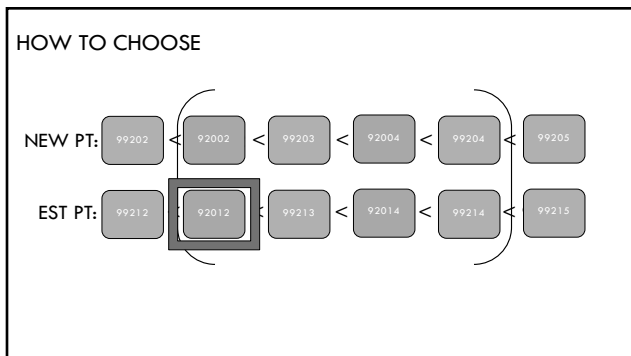
47

	Problems	Data	Risk	Time
99202 99212	Minimal • 1 Self-limited or minor problem	Minimal • 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
99203 99213	Low • 2 or more self-limited or minor problems; or • 1 stable chronic illness; or • 1 acute, uncomplicated illness or injury	Limited • 2 orders, tests performed, or additional documents analyzed; or • Assessment requiring an independent historian	Low Low risk of morbidity from additional diagnostic testing or treatment. Example: • OTC medication	NP: 30-45 mins EP: 20-29 mins
99204 99214	Moderate • 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	Moderate 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	Moderate 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	High • 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	Extensive 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	High 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

48

	Problems	Data	Risk	Time
	Minimal • 1 Self-limited or minor problem	Minimal • 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
99203 99213	Low • 2 or more self-limited or minor problems; or • 1 stable chronic illness or • 1 acute, uncomplicated illness or injury	Limited • 2 orders, tests performed, or additional documents analyzed, or • Assessment requiring an independent historian	Low Low risk of morbidity from additional diagnostic testing or treatment. Example: • OTC medication	NP: 30-45 mins EP: 20-39 mins
99204 99214	Moderate • 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	Moderate 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	Moderate Moderate risk of morbidity from additional diagnostic testing or treatment. Examples: • Prescription drug modification • 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	High • 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	Extensive 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	High 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 not to resuscitate or to deescalate care because of poor prognosis	NP: 60-74 mins EP: 40-54 mins

49



50

SPECIAL TESTING: KEY POINTS TO REMEMBER		
Order	Interpret	Multiples Rules
Document the order • "Order OCT-N to assess ONH asymmetry and glaucoma risk" No "standing orders"	For every order, • Date and physician signature (chart signed) • Reliability • Findings • Comparisons (progression? Stable?) • Associated diagnosis • Impact on treatment and prognosis	Payment reductions • Reduction in TC Payment denials

51

SPECIAL TESTING: KEY POINTS TO REMEMBER - INTERPRET

Interpret

For every order,

- Date and physician signature (chart signed)
- Reliability
- Findings
- Comparisons (progression? Stable?)
- Associated diagnosis
- Impact on treatment and prognosis

Optic Nerve OCT, reliable OD, OS.

OD: borderline RNFL thinning inferiorly with no GCC atrophy. Stable.

OS: Normal RNFL and GCC. Stable.

Findings OU consistent with glaucoma suspect.

Correlate with VF findings and continue to monitor q6-12 months for progression.

52

SPECIAL TESTING: KEY POINTS TO REMEMBER - INTERPRET

Multiple Rules

Payment reductions

Multiple Procedure Payment Reduction:

- Highest reimbursement = %100
- Additional codes = 20% reduction in TC

Which codes?

- Visual fields, OCT, fundus photography, external photography, sensorimotor exam, dark adaptation, ERG

53

SPECIAL TESTING: KEY POINTS TO REMEMBER - INTERPRET

Multiple Rules

Payment denials

Examples:

- OCT on same day as fundus photography
 - Advice: schedule on different day or use ABN
- E/M service on same day as FB removal (65222)
 - Advice: be very careful using -25 modifier
 - Needs to be completely unrelated
- Corneal abrasion during cataract post opt period
 - Advice: use -24 modifier on 992xx

54

I THOUGHT THIS WAS A CODING LECTURE. WHERE ARE YOU GOING WITH THIS?



Capture → Care → Code =
Continuous Practice Growth



Know the Codes,
appropriately use, and
document accordingly



Practice, practice, practice

55

CASE #3: 45, DRY EYES OU, WORSENING, NP

VA: 20/20 OD, OS cc

Pupils/EOMs/CVF normal, ortho

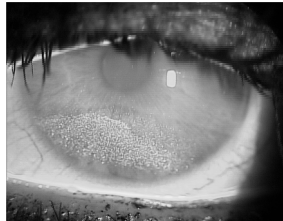
SLE: 2+lid telangiectasia, 2+ keratinization OU, see photo

IOP: 12/12

Posterior Seg:

0.2/0.2 OD, OS, NRR healthy, macula clear Ou

Order Inflammadry and osmolarity. Order external photos to assess corneal keratitis and monitor for progression. Order meibography to assess MG status considering moderate MGD findings.



56

CASE #3: 45, DRY EYES OU, WORSENING, NP



MWP9 results: 4+ positive OD and OS, consistent with underlying inflammation secondary to DED/MGD

Osmolarity: 323 OD, 319 OS. Findings consistent with DED.

External photography:

OD: video reveals partial blink with significant NaFL staining of inferior 1/3 of cornea

OS: video reveals partial blink with significant NaFL staining of inferior 1/3 of cornea. Findings OU consistent with exposure keratitis.

Meibography: OD: 1+MG atrophy, 1+tortuosity; OS: 1+MG atrophy, 1+tortuosity

PLAN: Start Xiidra, warm compresses, lid hygiene, in office lid procedure. RTO in 2-4 weeks to assess dry eye. Consider scleral lens OU.

57

	Problems	Data	Risk	Time
99202 99212	Minimal • 1 Self-limited or minor problem	Minimal • 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
99203 99213	Low • 2 or more self-limited or minor problems; or • 1 stable chronic illness; or • 1 acute, uncomplicated illness or injury	Limited • 2 orders, tests performed, or additional documents analyzed, or • Assessment requiring an independent historian	Low Low risk of morbidity from additional diagnostic testing or treatment. Example: • OTC medication	NP: 30-45 mins EP: 20-29 mins
99204 99214	Moderate • 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	Moderate 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	Moderate 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 • Decision for emergency major surgery • Diagnosis or treatment significantly limited by social determinants of health	NP: 45-59 mins EP: 30-39 mins
99205 99215	High • 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	Extensive 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	High 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

58

	Problems	Data	Risk	Time
99202 99212	Minimal • 1 Self-limited or minor problem	Minimal • 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
99203 99213	Low • 2 or more self-limited or minor problems; or • 1 stable chronic illness; or • 1 acute, uncomplicated illness or injury	Limited • 2 orders, tests performed, or additional documents analyzed, or • Assessment requiring an independent historian	Low Low risk of morbidity from additional diagnostic testing or treatment. Example: • OTC medication	NP: 30-45 mins EP: 20-29 mins
99204 99214	Moderate • 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	Moderate 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	Moderate 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 • Decision for emergency major surgery • Diagnosis or treatment significantly limited by social determinants of health	NP: 45-59 mins EP: 30-39 mins
99205 99215	High • 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	Extensive 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	High 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

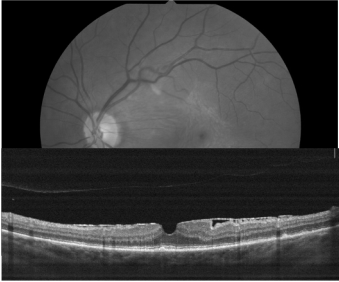
59

	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

60

CASE #4: 62, EP, DM EVAL, VISION CHANGES OS

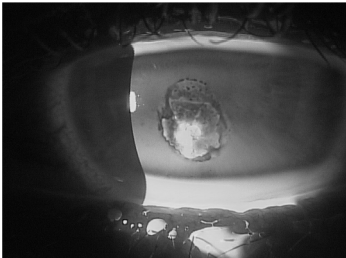
VA: 20/20 OD, 20/25+OS
 Pupils/EOMs/CVF: normal, ortho
 SLE: unremarkable OU
 Dilated ophthalmoscopy:
 Order OCT-macula to evaluate for tractional and epiretinal membrane.
 Assessment: ERM OS, DM2 no retinopathy
 Plan: RTO in 6 months to assess ERM.
 Perform OCT-M. Called and confirmed ERM dx with retinal specialist.



61

CASE #5: 38, NP, EYE PAIN OD, SUDDEN UPON AWAKENING

VA: 20/50 OD, 20/20 OS
 8/10 pain OD
 SLE: See photo
 Order external photos to evaluate and monitor progression of abrasion/RCE.
 Order corneal debridement to remove excess and loose epithelium.
 Order bandage contact lens




62

CASE #5: 38, NP, EYE PAIN OD, SUDDEN UPON AWAKENING

Office visit: 9920x
 External photos: 92285
 Corneal debridement: 65435
 Bandage CL: 92071

 Can't combine 65435 and 99x
 92071 considered part of 65435



63

	Problems	Data	Risk	Time
99202 99212	Minimal •1 Self-limited or minor problem	Minimal •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
99203 99213	Low •2 or more self-limited or minor problems, or •1 stable chronic illness or •1 acute, uncomplicated illness or injury	Limited •2 orders, tests performed, or additional documents analyzed, or •Assessment requiring an independent historian	Low Low risk of morbidity from additional diagnostic testing or treatment. Example: •OTC medication	NP: 30-45 mins EP: 20-39 mins
99204 99214	Moderate •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	Moderate 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	Moderate Moderate risk of morbidity from additional diagnostic testing or treatment. Examples: •Prescription drug modification •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	High •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	Extensive 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	High 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 not to resuscitate or to discontinue care because of poor prognosis	NP: 60-74 mins EP: 40-54 mins

64

CASE #5: 38, NP, EYE PAIN OD, SUDDEN UPON AWAKENING

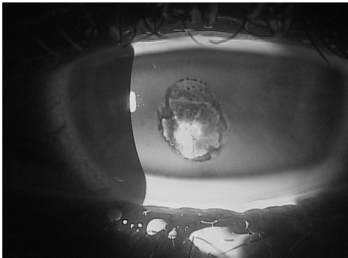
65435: ~\$83

OR...

99203: ~ \$114

92285: ~\$24

92071: ~\$37



65

CASE #6: 38 YO, FLASHES/FLOATERS OD ONSET 1 DAY

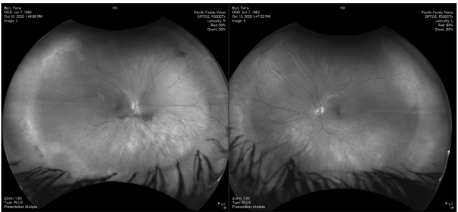
VA's: 20/20- OD,
20/20 OS

Pupils/EOM/CF: normal

SLE: unremarkable

Dilation with
Tropicamide 1%,
Phenyl 2.5%

Order extended
ophthalmoscopy with 3
mirror lens to evaluate
retinal periphery to
r/o retinal tears



OD: retinal hole w/ surrounding pigmentation @8:30, retinal hole @ 7:00 (-)SRF, mild vitreous heme centrally and @2:00, small pre-retinal heme @3:00

OS: areas of lattice from 3:00 – 9:00. No holes/tears. No RD.

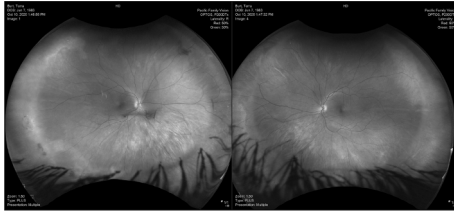
66

CASE #6: 38 YO, FLASHES/FLOATERS OD ONSET 1 DAY

ASSESSMENT:

Vitreous hemorrhage
OD, preretinal
hemorrhage OD, retinal
holes, OD

PLAN: RTO in 1-2
weeks to assess vitreous
hemorrhage



OD: retinal hole w/ surrounding pigmentation @ 8:30, retinal hole @ 7:00 (-)SRF, mild vitreous heme centrally and @ 2:00, small pre-retinal heme @ 3:00
OS: areas of lattice from 3:00 – 9:00. No holes/tears. No RD.

67

CASE #7: 65 GLC F/U, MODERATE OD, SEVERE OS, CE 2 MONTHS AGO

VA: 20/20 OD, OS cc

Pupils/EOMs/CVF: normal

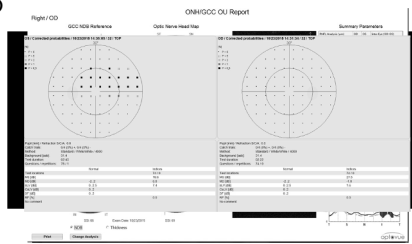
SLE: PCIOL OU

IOP: 16/17 (max untx:
22/28)

Latanoprost qhs OU, cosopt
bid OS

Posterior segment:

Order OCT-N and VF 30-2



68

	Problems	Date	Risk	Time
99202	Minimal *1 Self-limited or minor problem	Minimal *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 min EP: 10-19 min
99212	Low *2 or more self-limited or minor problems, or *1 stable chronic illness, or *1 acute, uncomplicated illness or injury	Limited *2 orders, tests performed, or additional documents analyzed, or *assessment requiring an independent historian	Low Low risk of morbidity from additional diagnostic testing or treatment. Example: *OTC medication	NP: 30-45 min EP: 20-29 min
99203	Moderate *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	Moderate 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	Moderate 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 *Decision regarding hospitalization *Diagnosis or treatment significantly limited by social determinants of health	NP: 45-59 min EP: 30-39 min
99205	High *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	Extensive 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	High 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
99215				

69

CASE #7: 65 GLC F/U, MODERATE OD, SEVERE OS, CE 2 MONTHS AGO

99214 – 24

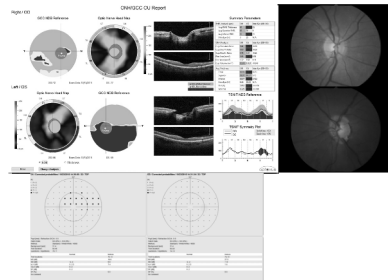
POAG severe, left

POAG mild, right

92083 – 79

92133 – 79

POAG mild, right



70

CASE #8: 48 RED, WATERY EYE OS

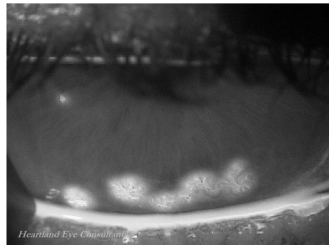
VA: 20/20 OD, 20/20- OS

SLE: see photo

Order external photos to evaluate and monitor progression of dendritic keratitis

ASSESSMENT: Herpesviral keratitis


PLAN: start acyclovir 500mg po 5x daily








71

	Problems	Data	Risk	Time
99202	Minimal *1 Self-limited or minor problem	Minimal *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 min EP: 10-19 min
99212	Low *2 or more self-limited or minor problems, or *1 stable chronic illness, or *1 undiagnosed new problem with uncertain prognosis, or *1 acute, uncomplicated illness or injury	Limited *2 orders, tests performed, or additional documents analyzed, or *assessment requiring an independent historian	Low Low risk of morbidity from additional diagnostic testing or treatment. Example: *OTC medication	NP: 30-45 min EP: 20-29 min
99203	Moderate *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	Moderate 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	Moderate 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 *Decision regarding hospitalization *Diagnosis or treatment significantly limited by social determinants of health	NP: 45-59 min EP: 30-39 min
99205	High *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	Extensive 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	High 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 discontinue care because of poor prognosis	NP: 60-74 min EP: 40-54 min
99215				

72



KEY POINTS

- 
 Our identity as ODs, primary care eye physicians, should underlie all our processes.
- 
 Follow the Capture – Care – Code model for sustainable growth.
- 
 Even with 99 code simplification, medical necessity still drives coding.
- 
 Figure out which codes are appropriate and choose the most reimbursement.
- 
 Managing prescription meds or a decision regarding a minor or major procedure = level 4.
