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Oculofacial Coding

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Financial Disclosure

- I have no financial interest or relationships to disclose relevant to this content.

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Topics

- CPT description updates for intermediate and complex repair effective January 1, 2020
- Surgical cases
- 2019 Biopsy codes
- Red flags in oculofacial documentation
- ICD-10
- Impact of draft E/M documentation proposal

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New CPT Description for Intermediate Repair

- CPT codes 12031 – 12057 Repair Intermediate
- Repair of wounds that require simple closure plus layered closure of one or more of the deeper layers of subcutaneous tissue and superficial (non-muscle) fascia
  - In addition to skin (epidermal and dermal) closure
  - Includes limited undermining
  - Heavily contaminated wounds with single-layer closure requiring extensive cleaning or removal of particulate matter also constitutes intermediate repair

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New CPT Description of Complex Repair

- CPT codes 13100 – 13160
- Repair of wounds that require simple and intermediate repair plus one of the following:
  - Exposure of bone, cartilage, tendon, or named neuro vascular structure;
  - Debridement of wound edges, extensive undermining greater than or equal to the maximum width of the defect measured perpendicular to the closure line along at least one entire edge of the defect;
  - Involvement of free margins of helical rim vermilion border, or nostril rim;
  - Placement of retention suture.

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New CPT Description of Complex Repair

- CPT codes 13100 – 13160 continued
- Preparation includes
  - Creation of a limited defect for repairs, or
  - Debridement of complicated lacerations or avulsions.
- Does not include
  - Excision of benign (11400-11446), or
  - Malignant (11600-11646) lesions
  - Excisional reparation of a wound bed (15002-15005), or
  - Debridement of an open fracture or open dislocation.

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Adjacent Tissue Transfer Scenario

- Surgery:
  - Removal of malignant lesion, left lower lid including canthus
    - Confirmed by pathology C44.1092
  - Reconstruction of left lower lid canthus, with extensive undermining and primary closure
    - Size 20X25 mm
- Coding:
  - Convert mm to cm 2.5
  - 11643 -LT Excision malignant lesion including margins, 2.1 to 3.0 cm
    - Office $328 Facility $239
  - 14060 -LT Adjacent tissue transfer 10 sq cm or less
    - Office $797 Facility $696

Adjacent Tissue Transfer Scenario

- Verify CCI edits. CCI linked from aao.org/coding

11643	Is bundled with 14060 since April 2006
14060	Not bundled with 11643

- Plus, per CPT "The excision of a benign or a malignant lesion is not separately reportable"

Adjacent Tissue Transfer Scenario

- Appropriate to unbundle?
  - Criteria for modifier -59 or
    - -XE Separate encounter
    - -XS Separate structure
    - -XP Separate practitioner
    - -XU Unusual Non-overlapping service
- Lastly, why modifier -LT and not -E2?
  - Not all commercial payers recognize HCPCS modifiers.

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Adjacent Tissue Transfer or Rearrangement

- Whether excisions/repairs are made by adjacent tissue transfer or Z, W, V-Y plasty rearrangement, report CPT 14000 -14302 depending on sq cm size
- 14060 performed by ophthalmology is 9.39%
  - Dermatology is 57.97%
  - 15.74% performed in ASC
  - 68.19% performed in office setting

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Ectropion + Conjunctivoplasty + Graft + Suture

- Surgery:
  1. Ectropion repair with conjunctivoplasty and full thickness skin graft, right lower lid
  2. Full thickness skin graft from right postauricular area, 40X17 mm
  3. Frost suture, right lower lid

Diagnosis: Cicatricial ectropion, RLL H02.112

- H02.11 Chapter header for ectropion of eyelid
  - 2 in 6th position represents right lower

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67961 -RT	**Excision & repair of eyelid, involving lid margin, tarsus, conjunctiva, canthus, or full thickness, may include prep for skin graft or pedicle flap with adjacent tissue transfer or rearrangement; up to one-fourth of lid margin** ***or is it 67966 over ¼ of lid margin?***	**Office $594** **Facility $466**	**Not bundled with 15260 or 67875**
15260 -RT	Full thickness graft, free, including direct closure of donor site, eyelids; 20 sq cm or less	Office $1,091 Facility $888	Not bundled with 67961 or 67875
67875 -RT	Temporary closure of eyelids by suture (eg, Frost suture)	Office $179 Facility $99	Not bundled with 67961 or 15260

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Ectropion + Conjunctivoplasty + Graft + Suture

- Correct claim submission:
- 15260 -RT + 67961 -RT + 67875 -RT
- Payment should be 100% + 50% + 50%
- Do not append modifiers -51 Multiple procedures or -59 Separate procedure
  - Unnecessary and triggers audits
- If payer recognizes HCPCS modifiers, may use -E4

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Ectropion + Conjunctivoplasty + Graft + Suture

- CPT code 15260
  - Performed 8.98% by ophthalmology
  - 64.84% dermatology
  - Only 21.32% performed in office
  - While CMS has site-of-service differential allowable, when the surgery is performed greater than 50% of the time in a facility, the commercial or Medicaid plan may not have an office based allowable.
  - If office based, when preauthorizing, confirm there is an allowable for POS 11.

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Integumentary Biopsies Effective January 2019

- 11102 Tangential biopsy; single lesion MUE of 1
  - + 11103 each separate/additional lesion (List separately in addition to code for primary procedure) MUE of 6
- 11104 Punch biopsy; single lesion MUE of 1
  - + 11105 each separate/additional lesion (List separately in addition to code for primary procedure) MUE of 3
- 11106 Incisional biopsy of skin; single lesion MUE of 1
  - + 11107 each separate/additional lesion (List separately in addition to code for primary procedure) MUE of 2

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Integumentary Biopsies

2 tangential biopsies	11102 X 1 + 11103 X1
3 punch biopsies	11104 X 1 + 11105 X 2
1 punch biopsy and 2 tangential biopsies	11104 X 1 + 11103 X 2

- From CPT examples:
  - 11102 – 11107 will probably not require modifiers for Medicare Part B due to MUEs
    - Just number of units in the unit field
  - Other payers may require
    - -RT, -LT, or -E1-E4

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Red Flag: Blepharoplasty Field or Photo?

CGS L33944	Visual field required, however photos may also be documented
FCSO L34028	Both visual field and photos are included
NGS A52837	Visual fields required, and photos are listed as well.
Noridian JE L34194 JF L36286	Photos are required rather than visual field
Novitas L35004	Photos are required rather than visual field
Palmetto L34411	COLOR photos are required, rather than visual field
WPS L34528	Visual fields required. Photos are not billable.

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Red Flags

- aao.org/lcds
- Local Coverage Determinations are update frequently
- These rules apply only to Medicare Part B and Medicare Advantage Plans
- Commercial and Medicaid plans can and do have their own documentation requirements and what meets functional criteria
  - Never apply one payer rules or perception of payer rule to all payers.

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Red Flags

- Blepharospasm
  - Modifier -JW showing wastage is not required by all payers!
    - Currently triggering audits though Office of Inspector General for state and commercial Medicaid plans.
      - Also uncovered that physicians are using cosmetic Botox for functional injections

Red Flags

- aao.org/pecos
  - Time frame to recredential or you won't be paid
- aao.org/MBI
  - New Medicare Part B numbers effective January 1, 2020

ICD-10 Effective October 1, 2019

- New: Fracture of Orbital Roof
  - Chapter Header S02
  - Oculofacial specialists can now convey to payers whether the fracture is on the
    - orbital roof,
    - medial or lateral orbital wall.

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ICD-10 Effective October 1, 2019

- A in the seventh position indicates initial encounter, closed fracture
- B in the seventh position indicates initial encounter, open fracture
- D in the seventh position indicates subsequent encounter with routine healing
- G in the seventh position indicates subsequent encounter with delayed healing
- K in the seventh position indicates subsequent encounter for fracture with nonunion
- See EyeNet's Savvy Coder October 2019

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E/M Proposed Changes

- Effective January 1, 2021
- Proposed: No more counting elements of history and exam
- Proposed: Final code determined by medical complexity or physician face-to-face time
- More info to come following release of Federal Register final rule Nov 2019

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Additional Coding Resources

- Questions may be emailed to coding@aao.org
- In an audit? Email audit@aao.org
- Coding Q/A aao.org/coding
- Oculofacial Coding Module aao.org/store

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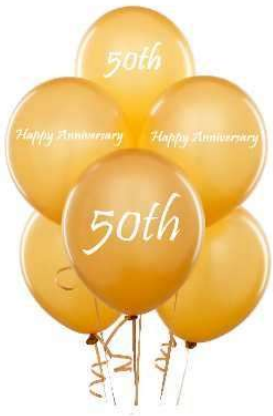
Congratulations!



Happy 50th Anniverary

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