

Test Your Coding Skills

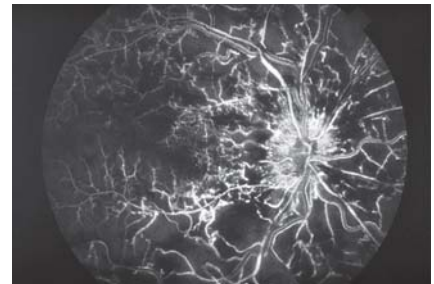
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According to insurance companies, what is the definition of a “minor” procedure? Is it one that is performed: a) in a short amount of time, b) in an office, or c) by teenage prodigy Douglas “Doogie” Howser, MD. The answer, of course, is none of the above. A minor procedure is one that has a zero- or 10-day global period. Now that you’re warmed up, try tackling this quick quiz.

Pop Quiz

- Q1.** “Add-on” codes carry their own global period in addition to the primary procedure.
a) True.
b) False.
- Q2.** Ophthalmic diagnostic tests are payable during the global period.
a) True.
b) False.
- Q3.** Procedures that have “one or more sessions” in their description can be billed as often as medically necessary within the global period.
a) True.
b) False.
- Q4.** A CPT code with a bilateral indicator of zero is payable at 100 percent of the allowable per eye.
a) True.
b) False.
- Q5.** In the Correct Coding Initiative, “mutually exclusive edits” are codes that:

- a) Are never paid separately.
b) Are payable using modifier –25.
c) Are payable using modifier –59.
- Q6.** A patient presents with foreign body sensation. Trichiasis is found in both eyes, and epilation (CPT code 67820) is performed on both upper lids. You should code:
a) E&M or Eye Code; modifier –25; and CPT code 67820–50.
b) CPT code 67820 only.
c) E&M or Eye Code; modifier –57; and CPT code 67820.
- Q7.** Abuse is defined by the CMS as the intent to obtain payment for which the physician is not entitled.
a) True.
b) False.
- Q8.** Fluorescein angiography (CPT code 92235) and fundus photography (92250) are performed on the same day. There is pathology in both eyes. You should code:
a) 92250–50 and 92235–50.
b) 92250, 92235–RT and 92235–LT–50.



POP QUIZ. Is fluorescein angiography payable per eye? What are “mutually exclusive edits”? Test your coding IQ.

- c) 92250, 92235–RT and 92235–LT.
- Q9.** Pterygium excision with graft (CPT code 65426) is performed using amniotic membrane (65780). You should code:
a) For the pterygium excision only, since the graft is bundled in the Correct Coding Initiative..
b) For amniotic graft only, since it has the highest allowable.
c) 65780–eye modifier and 65426–59–eye modifier.

Answers: Q1—b) False. They have their own fee schedule, but no global period. Q2—a) True. But only if medically indicated. Q3—b) False. No matter how many times the procedure is repeated for the same indication, only one claim is submitted. Q4—b) False. The zero indicates the procedure is payable per session, not per eye. Q5—a) True. Q6—b) False. Fraud, not abuse, involves intent. Q8—c) Fundus photography has inherently bilateral payment. Fluorescein angiography is payable per eye when medically necessary. When using modifiers –RT and –LT, there is no need to add –50 since doing so would indicate the patient had three eyes tested. Q9—a) The transplant is not separately billable per the CCI.