American Academy of Ophthalmic Executives’

Checklist: Intravitreal Injections Documentation and Coding Guidelines

Reviewed August 2022.

Reminder: Update per payer guidelines.

Chart Documentation

☐ Visual acuity, chief complaint and appropriate history of present illness (HPI)
☐ Treatment plan
  ☐ For new patients, document why the specific medication was chosen.
  ☐ For established patients, document response to current medication and why continuing.
  ☐ When changing medications, document the reason.
☐ Diagnosis supporting medical necessity and appropriate indication for use per payer policy and/or FDA indication
☐ Any relevant diagnostic testing services, with interpretation and report
☐ Risks, benefits and alternatives discussed
☐ Document that the patient desires surgery
☐ Physician’s order includes:
  ☐ Date of service
  ☐ Medication name and dosage in mg and mL
  ☐ Diagnosis
  ☐ Physician signature
☐ Interval of administration is appropriate per the 28-day rule
☐ Procedure record includes:
  ☐ Diagnosis
  ☐ Route of administration (intravitreal injection) and medication name
  ☐ Site of injection - eye(s) treated
  ☐ Dosage in mg and volume in mL, (eg, Avastin 1.25 mg/0.05 mL) and lot number
  ☐ For Single-use vials or syringes, record wastage 1 unit or greater (eg, Triesence)
  ☐ For wastage less than 1-unit document: “any residual medication less than one unit has been discarded.” (eg, EYLEA)
  ☐ Consent completed for injection, medication and eye(s) on file and updated annually
  ☐ For initial treatment using a medication for off-label use, an informed consent with that notification is completed. (eg, Avastin)
  ☐ Advance Beneficiary Notice (ABN) for Medicare Part B beneficiaries or waiver of liability (all other patients) is completed, if applicable (eg, diagnosis not indicated, exceeds frequency)
☐ Chart record is legible and has patient identifiers (eg, patient name, date of birth) on all pages
☐ Physician signature is legible
☐ Paper chart records have a signature log
☐ EHR, the electronic physician signature is secure, and the related practice policy is readily available for audits
☐ Abbreviations are consistent with an approved list and readily available for audits
☐ Maintain legible inventory logs and medication administration records (MAR)
Coding Injections

☐ CPT 67028, eye modifier appended (-RT or -LT)
  o Bilateral injections billed with a -50 modifier per payer guidelines. (Medicare Part B claims billed with 67028 -50 on one line, fees doubled and 1 unit.)
☐ HCPCS code for the medication
☐ Appropriate units administered (ie, EYLEA 2 units)
☐ HCPCS code on a second line for wasted medication, if appropriate
  o JW modifier appended
☐ Medically necessary ICD-10 code appropriately linked to 67028 and HCPCS code(s)
☐ On the CMS-1500 claim form in item
  o 24a or EDI loop 2410: 11-digit NDC code in 5-4-2 format, proceeded by “N4” qualifier followed by unit of measurement (UOM), ML and appropriate amount. (e.g., ML0.05)
    ▪ Example, Avastin: N450242006001 ML0.05
  o 19 or EDI equivalent: Description of administration method, medication and dosage per insurance guidelines and when reporting a miscellaneous HCPCS code (eg, Avastin)