

Bundling Edits Effective Oct. 1

Effective Oct. 1, the Correct Coding Initiative Edits (CCI), version 26.3 goes into effect. These are released quarterly by Centers for Medicare & Medicaid Services (CMS) and instruct physicians on what services are bundled together and not separately billable when performed the same day.

This quarter, CCI has bundled CPT code 99211 with surgical and testing services with an indicator of 1. Most all the codes used by ophthalmology are impacted.

The following list indicates what codes are excluded from the new bundle:

Testing Services:

92015 Determination of refractive state

92227 Remote imaging for detection of retinal disease (e.g., retinopathy in a patient with diabetes) with analysis and report under physician supervision, unilateral or bilateral

92228 Remote imaging for monitoring and management of active retinal disease (e.g., diabetic retinopathy) with physician review, interpretation and report, unilateral or bilateral

95930 Visual evoked potential (VEP) checkerboard or flash testing, central nervous system except glaucoma, with interpretation and report

Laboratory Tests

83516 Immunoassay for analyte other than infectious agent antibody or infectious agent antigen; qualitative or semiquantitative, multiple step method

83861 Microfluidic analysis utilizing an integrated collection and analysis device, tear osmolarity

87809 Infectious agent antigen detection by immunoassay with direct optical observation; adenovirus (Adeno Detector)

All Add-on Codes

Two exceptions include biopsy CPT codes 11103, 11105, 11107 and grafting of autologous fat CPT code 15774

All Radiology Codes

With one exception for CPT code 76519 Ophthalmic biometry by ultrasound echography, A - scan; with intraocular lens power calculation

Indicator 1 states that there are times when it is appropriate to unbundle.Indicator 0 states these two codes can never be unbundled.

We also received additional edits to Category III codes listed below.

To see all CCI edits, the Academy provides a link to the CMS site on the <u>coding updates</u> <u>and resources page</u>.

Column 1	Column 2	Bundling Edit
O356T Insertion of drug-eluting implant (including punctal dilation and implant removal when performed) into lacrimal canaliculus, each O402T Collagen cross-linking of cornea, including removal of the corneal epithelium and intraoperative pachymetry, when performed (report	99211-99215 99218-99220 99221-99223 99231-99233 99234-99239 99291-99292 99304-99306 99307-99310 99347-99350	1
medication separately) 0444T Initial placement of a drug-eluting ocular insert under one or more eyelids, including fitting, training and insertion, unilateral or bilateral		
0445T Subsequent placement of a drug- eluting ocular insert under one or more eyelids, including retraining and removal of existing insert, unilateral or bilateral		
0449T Insertion of aqueous drainage device, without extraocular reservoir, internal approach, into the subconjunctival space: initial device		
0450T each additional device		
0465T Suprachoroidal injection of a pharmacologic agent (does not include supply of medication)		
0474T Insertion of anterior segment aqueous drainage device, with creation of intraocular reservoir, internal approach, into the supraciliary space		
O506T Macular pigment optical density measurement by heterochromatic flicker photometry, unilateral or bilateral, with interpretation and report	99211	1

0507T Near-infrared dual imaging (i.e.,	
simultaneous reflective and trans-	
illuminated light) of meibomian glands,	
unilateral or bilateral, with interpretation	
and report	
0509T Electroretinography (ERG) with	
interpretation and report, pattern	
(PERG)	