

## Test Your Modifier Knowledge

**T**his month's quiz is based on questions from a webinar titled Mastering Modifiers: The Financial Make or Break of Your Practice. (You can buy a recording of the webinar at [aao.org/store](http://aao.org/store).)

### Modifier Recap

Before you tackle this test, here's a reminder of some commonly used modifiers:

- 24 Unrelated E&M (or Eye visit code) service during the postop period
- 25 Significant, separate E&M (or Eye visit code) service on the same day as a minor procedure
- 57 Decision to perform major surgery
- 50 Bilateral procedure
- 54 Surgical care only
- 55 Postoperative care only
- 58 Staged/related procedure during postop period
- 78 Unplanned return to operating room (OR)/procedure room for related procedures by the same physician during the postop period
- 79 Unrelated procedure or service by the same physician during postop period
- RT Right eye
- LT Left eye

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### Modifiers and Exams

**Q1.** After seeing a glaucoma patient, your practice submits CPT codes 92012 (for the exam) and 92081 (visual field test). Do you need to append modifier -25 to the exam code? **A.** Yes. **B.** No. (This was answered correctly by 100% of webinar participants.)

**Q2.** Must modifier -24 be appended to any test performed during the global period of an unrelated surgery? **A.** Yes. **B.** No. (Answered correctly by 75%.)

**Q3.** After cataract surgery, the operated eye is examined during the surgery's global period. The exam reveals that a YAG capsulotomy is medically necessary. The exam is: **A.** Not billable because it is within the global period. **B.** A billable visit because it produced a new diagnosis. (Answered correctly by 42%.)

**Q4.** A new Medicare patient presents for glaucoma evaluation. After an exam (CPT code 99XXX) and gonioscopy (92020) of both eyes, the patient is found to have narrow angles bilaterally. Later that day, the surgeon performs a

laser peripheral iridotomy (PI; 66761) on the patient's right eye. How should this claim be submitted? **A.** 99XXX-25, 92020, 66761-RT. **B.** 99XXX-57, 92020, 66761-RT. **C.** 99XXX, 92020-59, 66761-RT. **D.** 99XXX, 92020, 66761-RT. (Answered correctly by 33%.)

### Tests and Surgical Modifiers

**Q5.** A patient undergoes trabeculectomy to his left eye. During the surgery's postoperative period, the physician determines that the patient will receive a therapeutic injection of 5-fluouracil, triamcinolone (Kenalog), or bevacizumab (Avastin). What code would you use? **A.** 68200-58-LT. **B.** Not billable because it is postop. **C.** 68200-78-LT. (Answered correctly by 56%.)

**Q6.** The physician repaired a patient's retinal detachment (CPT code 67105-RT). During the postoperative period, the patient requires scleral buckling (67107). What code should you use? **A.** 67107-58-RT. **B.** 67107-78-RT. **C.** 67107-79-RT. (Answered correctly by 16%.)

**Answers** 1. B—No. Don't append -25 to E&M or Eye visit codes when tests, not minor surgeries, are done the same day. 2. B—No. Tests are payable whether related or unrelated to the surgery. Appending the modifier increases the risk of denied claims and audits. 3. A—The exam is within the global period and not separately billable, as the capsulotomy would be unneeded had there been no cataract surgery; the capsulotomy will be billable. 4. D—99XXX, 92020, 66761-RT. The global period for the PI is 10 days, and modifier -25 is not required for new patient exams. (However, the answer would have been B if, instead of Medicare, this case had involved a commercial plan that hadn't reduced the global period to 10 days.) Finally, as gonioscopy is not bundled with a PI, there is no need for modifier -59. 5. A—68200-58-LT. Payment is 100% of the injection code and the drug. 6. A—67107-58-RT. Payment is 100% of the allowable and a new global period begins.