Checklist: Testing Services
Fluorescein Angiography (FA) / Fundus Photography (FP) Documentation

☐ Use insurance policies as a reference.
Review the Medicare Administrative Contractors (MAC) Local Coverage Determination (LCD) and National Coverage Determination (NCD) or other commercial insurance policies, as applicable. These policies provide guidance for insurance coverage and documentation requirements.

☐ Record chart notes supporting medical necessity per insurance policies.
A review of the patient’s medical records provides documentation of the medical necessity for the diagnostic test billed including the pathology per eye and reflects the context of a changing clinical picture.
- Diagnostic testing performed for screening purposes would not be deemed medically necessary.
- Medicare MACs with local coverage determinations for FA include: CGS, First Coast and Palmetto.
- Medicare MACs with local coverage determinations for FP include: CGS, First Coast, NGS and Palmetto.
- When reviewing documentation for insurance payers without policies, the Academy Coding Coach can be used as a guideline for medically necessary diagnoses.
  - Fluorescein Angiography is used to identify by fluorescence the leaking from damaged vessels and make it useful in the diagnosis of chorioretinal vascular disorders, especially relating to choroidal neovascularization, noninfective vasculitis and age-related macular degeneration.
  - Fundus photography is covered when used to diagnose abnormalities of the retina. The photos may be necessary to follow the progress of a disease or to plan treatment.

☐ Obtain physician order.
Written or electronic physician order for each test includes:
- Date of service
- Medically necessary diagnosis
- Eye(s) being tested
- Physician signature

☐ Medical records include the following.
- A copy of the photography for each diagnostic test (digital or photographic)
- Record of whether the pupil was dilated and the medication that was used
- Relevant examination, history and diagnostic testing related to the medical necessity

☐ Complete interpretation and report for each test performed per eye.
- FA and FP reports are not combined.
- There are no published documentation requirements for the interpretation and report. The required documentation could include:
  - Clinical findings - summary of pertinent findings
  - Comparative data - better, worse or same
  - Clinical management - how test effected management

☐ Frequency of the medically necessary test should be billed based on the insurance policies guidelines.
- Some MACs have published LCDs with the following frequency requirements:
  - FA should not be billed more than 9 times per year.
  - FP is usually not medically necessary more than 1-2 times per year.
  - FA should not be billed within 30 days of billing for Indocyanine Green Angiography (ICG).

• The frequency for performing FA or FP is based on indication.
• FA is used to document recurrent leakage for patients with dry AMD every 6-12 months.

☐ **File insurance claim.**
Complete CMS-1500 paper claim or Electronic Data Interface (EDI) transaction 837P electronic claim completed with the following:
  ☐ FA (92235) and FP (92250) are billed with appropriate diagnosis linkage supporting the medical necessity.
  ☐ FP (92250) is bundled the same day as Optical Coherence Tomography (OCT), 92132, 92133, and 92134.
  ☐ 92235 and 92250 have a bilateral indicator of 2 and are considered inherently bilateral. It is inappropriate to use -RT, -LT or -SO modifiers.

☐ **Obtain physician signature.**
  • Ensure the physician signature is legible on paper chart records
  • Create a signature log to provide during an audit. The log should include initials and signature and credentials of all who may document in the chart.
  • For EHR, the electronic physician signature is secure. Ensure the practice has an electronic signature policy to provides in the event of an audit.

☐ **Chart notes have the correct beneficiary name and date of birth.**
☐ **Prepare abbreviation list.**
The practice has an approved abbreviation list readily available for all audits.

**CCI edits**

92250: Mutually exclusive with 92227