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QUESTION: What are the indications for scanning computerized ophthalmic diagnostic imaging of the anterior segment?

ANSWER: There are many indications for scanning computerized ophthalmic diagnostic imaging of the anterior segment (SCODI-A), including: assessment of both corneal flap thickness and residual stromal thickness following LASIK, measurement of corneal thickness, visualization of IOLs and other implants in the anterior segment, evaluation of anterior segment ocular structures, and measurement of anterior chamber angles, anterior chamber depth and anterior chamber diameter.

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QUESTION: What documentation is required in the medical record to support claims for SCODI-A?

ANSWER: In addition to proof that digital images exist, the chart should contain:

- an order for the test with medical rationale
- the date of the test
- the reliability of the test
- the test findings (e.g., dislocated IOL)
- a diagnosis (if possible)
- the impact on treatment and prognosis
- the signature of the physician

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QUESTION: What CPT code should we use to describe SCODI-A?

ANSWER: Effective January 1, 2011, there is a new CPT code to describe this test: 92132, *Scanning computerized ophthalmic diagnostic imaging, anterior segment, with interpretation and report, unilateral or bilateral*. Prior to 2011, the Category III code 0187T was used.

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QUESTION: What is the reimbursement for 92132?

ANSWER: The 2011 Medicare Physician Fee Schedule allowable is \$36.35. Of this amount, \$15.29 is assigned to the technical component of the test, and \$21.07 to the professional component (i.e., interpretation). These amounts are modified by local wage indices so actual payment rates will vary. The code is defined by Medicare as bilateral, so this is for one or both eyes. Other payers set their own rates, which may differ significantly from the Medicare published fee schedule.

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QUESTION: Is the physician's presence required while SCODI-A is being performed?

ANSWER: No. Under the Medicare program standards, SCODI-A only needs general supervision. *General supervision* means the procedure is furnished under the physician's overall direction and control, but the physician's presence is not required during the performance of the test. The physician's prompt interpretation of the test results is still required.

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QUESTION: If SCODI-A and SCODI-P are performed on the same day for the same patient, can both be reimbursed?

ANSWER: No. Under Medicare rules, SCODI-A is bundled with SCODI-P. Other payers are not obliged to follow Medicare's National Correct Coding Initiative edits, and may have different guidelines.

January 3, 2011

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MEDICARE REIMBURSEMENT FOR SCODI OF THE ANTERIOR SEGMENT

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QUESTION: At present, does Medicare cover SCODI-A?

ANSWER: Yes; some (but not all) MACs cover SCODI-A for evaluation of narrow angles and a few other disorders of the cornea, iris and ciliary body. Check your local coverage policies for more information.

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QUESTION: May I use CPT code 76513 to identify SCODI-A?

ANSWER: No. CPT 76513 is used to describe anterior segment ultrasound. SCODI-A uses optical coherence tomography rather than ultrasound, so 76513 is not appropriate.

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QUESTION: If SCODI-A is performed for a non-covered indication, who is responsible?

ANSWER: The beneficiary is financially responsible for non-covered services. Explain to the patient why SCODI-A is necessary and that Medicare will likely deny the claim. Ask the patient to assume financial responsibility for the charge and get his/her signature on an Advance Beneficiary Notice of Noncoverage (ABN) prior to performing the test. You may collect your fee from the patient at the time of service or wait for a Medicare denial. If both the patient and Medicare pay, promptly refund the patient or show why Medicare paid in error.

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QUESTION: May I use CPT code 76514 to identify pachymetry performed with my SCODI-A instrument?

ANSWER: No. CPT 76514 is used to describe pachymetry by ultrasound. As mentioned above, optical coherence tomography rather than ultrasound is employed in SCODI-A, so 76514 is not appropriate.

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QUESTION: May 92020 (*i.e.*, gonioscopy) be used to report imaging of the anterior chamber angle?

ANSWER: No. Gonioscopy, as the term is commonly understood, does not include imaging. Rather, CPT 92285 (*external ocular photography with interpretation and report for documentation of medical progress*) is used to report goniophotography. Note that SCODI-A is not classified as photography, but as scanning computerized ophthalmic diagnostic imaging.

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