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Billing & Coding

Medicare Atlanta 2019 Allowable Listed

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Global Period

Time starting with a surgical procedure and ending some period of time after the procedure where all office visits associated with the surgical procedure are covered by a global fee.

3

Incision vs Excision (NOT Injection)

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Incision (NOT Injection)

- Cutting tissue withOUT removal
 - Simple/Single: 10060 (\$121.65)
 - Complicated/Multiple: 10061 (\$212.16)

10 Day Global Period

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Excision (NOT Injection)

- REMOVAL of tissue
- Excision (except Chalazion): 67840 (\$284.96)
- Chalazion Excision
 - Single: 67800 (\$131.27)
 - Multiple Same Lid: 67801 (\$167.39)
 - Multiple Different Lid: 67805 (\$207.77)

10 Day Global Period

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Georgia's Law: Injections Prerequisites

- GA License
- Successful Completion of an Injectables Training Program, sponsored by a school or College of Optometry credentialed by the US Department of Education and the Council on Postsecondary Accreditation consisting of a minimum of 30 hours approved by the board

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Georgia's Law

- What can you inject?
 - Steroid
 - Antibiotic
 - Anesthetic
- What type of injections?
 - Intralesional
 - Subconjunctival
 - Exception for Anesthetic!

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Georgia's Law

- What can you NOT inject?
 - Subtenon
 - Retrobulbar
 - Peribulbar
 - Facial Nerve Block
 - Dermal filler
 - Intravenous
 - Intramuscular
 - Intraorbital nerve block
 - Intraocular
 - Botulinum Toxin
 - EpiPen
 - Anaphylaxis
 - Subconjunctival Anesthetic

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CPR Training



10

Defibrillator*



*Tennessee Amendment requires AED on site

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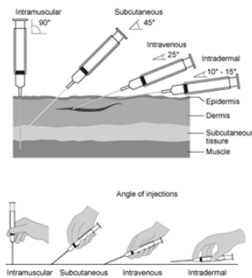
STAT Kit?



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General Injection Sites

- Intradermal
 - Eyelid Injections
- Intravenous
- Subcutaneous
 - NO defined subcutaneous space in the eyelid
- Intramuscular



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Subcutaneous Injection

- Medication absorbs slowly
- Examples
 - Insulin
 - Hormones
 - Vaccines
 - Allergy Shots



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Types of Injections

- Subcutaneous
- **Periocular**
- Intraocular
- Intravenous
- Intramuscular

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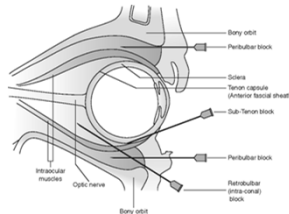
Types of Periocular Injections

- Subconjunctival
- Intralesional
- Subtenon
- Peribulbar/local anesthetic blocks
 - Specialty uses
 - Ex: Botulinum Toxin

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Types of Periocular Injections you are probably **NOT** doing

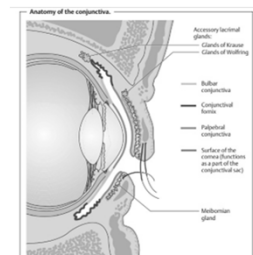
- Subtenons
- Peribulbar
 - Ex: Local Anesthetic Blocks
- Specialty uses
 - Ex: Botulinum Toxin



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Types of Periocular Injections you MAY be doing

- Subconjunctival
- Intralesional
 - Ex: Chalazion Injection



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Informed Consent (General)

- Layman's Terms
- Discuss Allergies
- Describe Procedure
- Rational for Treatment
- Alternative Treatments
- Abnormal/Off Label use MUST be documented
- All risks/uncertainties discussed, understood & consented to
 - **No Consent → Assault**
- Patient must sign!

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Intralesional Injection Informed Consent

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Informed Consent: Intralesional Injections

- No requirement to have the injection
- Right to have or decline the injection into his/her eyelid today or at any point in time in the future
- Considered off-label for the medication
- Risk associated with the injection includes but is not limited to hemorrhage, increased intraocular pressure, changes in skin pigmentation, eyelid edema, conjunctival necrosis, keloid scarring, capillary hemangioma, cataract and eyeball perforation

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Informed Consent: Intralesional Injections (Continued)

- Multiple injections may be required
- Injection(s) may not partially or completely resolve the problem
- If injection(s) do not solve the problem, surgical removal will be the next option if he/she wants complete resolution
- Declines Keloid scarring in the past
- Consents to receive the steroid injection of Kenalog 40mg/mL injection into affected eyelid(s)

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Informed Consent: Intralesional Injections (Continued)

- Understand that it is impossible for the doctor to inform me of every possible complication that may occur
- No guarantees about results have been made
- All of my questions have been answered
- Understand and accept the risks, benefits and alternatives of a Kenalog injection
- Consent to be tested for Sexually Transmitted Infections

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Informed Consent: Intralesional Injection Alternative Treatments

- Continue Current Treatment
- Doing Nothing
- Injection
 - NOT 100% success rate
 - May have to be repeated
- Surgical removal
 - 100% success rate

It's the patient's choice!

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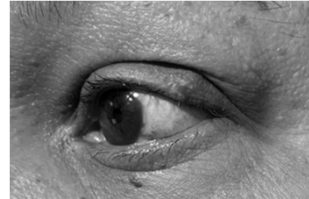
Informed Consent: Success Rate-Rule of 6

Smaller than 6mm
and/or
Less than 6 months in duration
=
60% chance that the lesion will positively respond

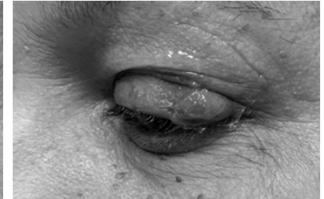
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Informed Consent: Intralesional Injection You May Look Worse Than When You Came In

Before

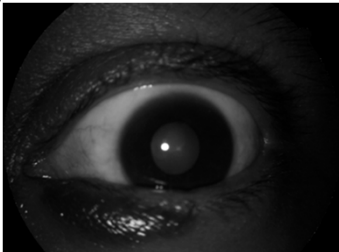


After



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Informed Consent: Intralesional Injection Black Eye



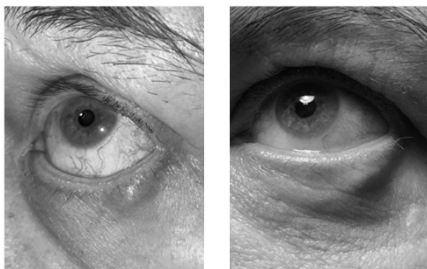
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Malpractice

Leading cause of large malpractice claims against ODs is misdiagnosis which leads to a **failure to refer**

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Reoccurring Chalazion in Same Spot



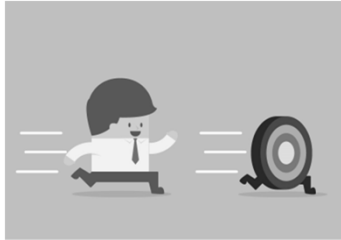
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Reinject vs Surgical Removal/Biopsy

- Reinject
 - If first injection showed an improvement
 - I will only inject same lesion twice
- Surgical Removal/Biopsy
 - Keeps coming back in the exact same spot → Possible **sebaceous cell carcinoma**

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Informed Consent: Dynamic Document



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Intralesional Injection Supplies

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Intralesional Injection Supplies: Checklist

- Gloves
- Anesthetic
- Syringe/Needle
- Kenalog-40
- Chalazion forceps with Jaeger Plate
- Sharps Container & Biohazard Waste Bag
- Antibiotic Ointment & Cotton Tipped Applicator
- Autoclave

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Gloves

- Avoid Latex
 - Up to 6 percent of the Americans (19 million) have an allergy
- Avoid vinyl
 - Reduced barrier protection
- Correct size!



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Anesthetic

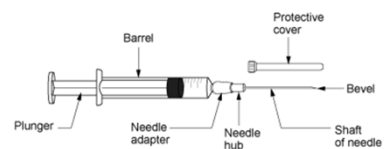
- Proparacaine
- Topical Lidocaine 4%
 - Apply 60 seconds twice
 - I do NOT use
- Lidocaine Injection
 - Same size needle (and PAIN!) as steroid injection
 - I do NOT use



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Needle Anatomy

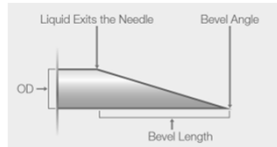
- Gauge
 - Inner measurement or opening of the needle
 - Bigger the number → smaller the needle



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Needle Anatomy

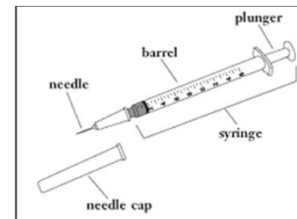
- Bevel
 - Slanted portion of a needle tip that facilitates nontraumatic entry
- BEVEL UP for Intralesional & Subconjunctival Injections



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Syringe & Needle

- Needle
 - 27 gauge
 - ½ inch
- Syringe
 - 1mL
 - 1cc/mL
- Latex Free



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Steroid: Kenalog-40

- 40 mg Kenalog per 1ml of Solution



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Steroid: Kenalog-40

- 40 mg Kenalog per 1ml of Solution
- 1cubic centimeter (cc) = 1 milliliter (ml)
- Inject .1-.2cc
 - .1ml x 40mg/ml = 4mg



40

Steroid: Kenalog-40

- 40 mg Kenalog per 1ml of Solution
- 1cubic centimeter (cc) = 1 milliliter (ml)
- Inject .1-.2cc
 - .1ml x 40mg/ml = 4mg
 - .2ml x 40mg/ml = 8mg



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Steroid: Kenalog-40

- Triamcinolone (Generic)
- Once opened → discarded within 28 days
- Stored at Room Temperature

Suspension → Shake!



Eagle
PHARMACY

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Chalazion Forceps with Jaeger Plate

- Jaeger Plate
 - Placed between the lid and the globe during injections
 - Prevents puncturing the globe



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Chalazion Forceps with Jaeger Plate

- Pain of forceps distracts patient from pain of injection
- Tourniquet
- "Tighten until it hurts then tighten a little more." –Dr. Jason Duncan



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Sharps Container & Biohazard Waste Bags



- Mail sharps



- Picks up sharps
- Includes OSHA training



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Antibiotic Ointment & Cotton Tipped Applicator



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Instrument Cleaning

- Manual Cleaning
 - Stiff plastic cleaning brush
 - Neutral detergents
 - Rinse with distilled water
- Autoclave
 - 250°F
 - 30 minutes (minimum)
- OR
- Chemical Sterilization
 - Germicidal bath
 - 10 hours
 - Rinse with distilled water



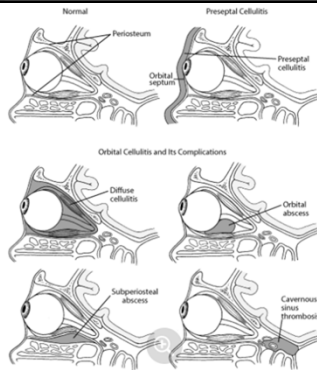
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Intralesional Injections

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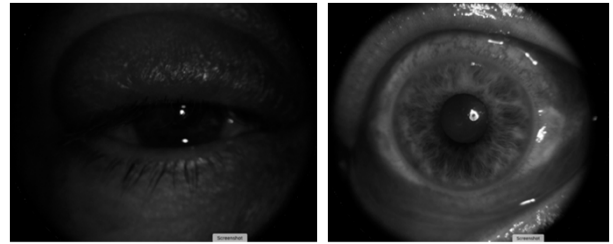
Do NOT Inject: Cellulitis

- Pre-septal
 - Infection of the eyelid and surrounding skin anterior to the orbital septum
- Orbital
 - Infection of the orbital tissues posterior to the orbital septum



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Do NOT Inject: Pre-septal Cellulitis



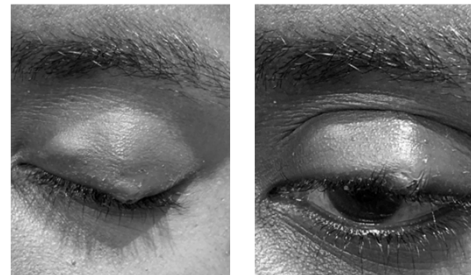
50

Do NOT Inject: Malignant Lesion



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Do NOT Inject: Open Wounds



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Hordeolum

- Usually Staphylococcus
 - Gram-positive bacteria
- Treat Orally
 - Keflex 500mg TID x 10 days (Penicillin cross-allergy risk)
 - Augmentin 500mg BID x 10 days (Penicillin cross-allergy risk)
 - Doxycycline 50mg BID x 30 days (if allergic to Penicillin)
 - Must be at least 13 years old!

Can turn into Chalazion!

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Do NOT Inject: External Hordeolum

- Infection of Gland of Zeis or Moll
 - **Glands of Zeis:** Sebaceous gland located on the margin of the eyelid
 - **Glands of Moll:** modified apocrine sweat glands that are found on the margin of the eyelid

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Do NOT Inject: Internal Hordeolum

- Infection of Meibomian Glands
 - Holocrine type exocrine glands
- Less Common than External Hordeolum

More likely to become a Chalazion than External Hordeolum

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Chalazion

- NOT infectious
- Hardened oils blocking the gland
- Meibomian Gland or Gland of Zeis



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Hand Hygiene

- Wash with soap and water
- Scrub for at least 20 seconds
- Dry hands with clean towel



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Preparing Syringe

- .3cc of air → .3cc of medication
- Not easy to get medication through 27 gauge needle



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Eyelid Disinfection & Clamp



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Shake and Remove Air



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Chalazion Injection



Billing & Coding

Medicare Atlanta 2019 Allowable Listed

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What does it mean if an insurance company pays 100% of what you charge for an exam/procedure?

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Injections: Billing & Coding

- Any evaluation that was done to determine the need for the surgical procedure is included in that surgical procedure.

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Injections: Billing & Coding

- In order to justify an Exam (992xx or 920xx) on the same date of service as a surgical procedure, a second and significant diagnosis (if appropriate!) would be needed to support the Exam.
 - And the -25 modifier would need to be added to the Exam

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Modifiers

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-25 Exam Modifier

- Unrelated procedure with different diagnosis than primary diagnosis
- A diagnosis independent of the surgical procedure is required
- Exam's Primary Chief Complaint should be completely independent of the surgical procedure performed that day

Red flag for audits!

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-RT/LT Procedure Modifier

- RT = Right Side
- LT = Left Side

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Chalazion ICD-10 Codes

- H00.11 Chalazion Right Upper Eyelid
- H00.12 Chalazion Right Lower Eyelid
- H00.13 Chalazion Right Unspecified Eyelid
- H00.14 Chalazion Left Upper Eyelid
- H00.15 Chalazion Left Lower Eyelid
- H00.16 Chalazion Left Unspecified Eyelid
- H00.19 Chalazion Unspecified Eye Unspecified Eyelid

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Chalazion ICD-10 Codes

- H00.11 Chalazion Right Upper Eyelid
- H00.12 Chalazion Right Lower Eyelid
- ~~H00.13 Chalazion Right Unspecified Eyelid~~
- H00.14 Chalazion Left Upper Eyelid
- H00.15 Chalazion Left Lower Eyelid
- ~~H00.16 Chalazion Left Unspecified Eyelid~~
- ~~H00.19 Chalazion Unspecified Eye Unspecified Eyelid~~

NEVER use UNSPECIFIED ICD-10 Codes!

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Chalazion ICD-10 Codes

- H00.11 Chalazion Right Upper Eyelid
- H00.12 Chalazion Right Lower Eyelid
- H00.14 Chalazion Left Upper Eyelid
- H00.15 Chalazion Left Lower Eyelid

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Intralesional Injections CPT Codes

- Chalazion Injection (Up to 7 lesions): 11900 (\$57.62)
- Chalazion Injection (More than 7 lesions): 11901 (\$70.51)

10 Day Global Period

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Kenalog (Triamcinolone Acetonide) Code

- J3301
 - >0-10mg injected = 1 Units (\$1.58 is my average reimbursement)
 - 20mg injected = 2 Units
 - 30mg injected = 3 Units
 - 40mg injected = 4 Units

Usually Injecting .1-.2cc (= 4-8mg)

Usually billing 1 unit for Chalazion Injection

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ONLY Intralesional (Chalazion) Injection Upper Left Eyelid

- 11900-LT Chalazion Injection Left
 - Associated Dx: H00.14 Chalazion Upper Left Eyelid
- J3301-LT Kenalog (Triamcinolone Acetonide) -1 Unit

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ARMD Check OU & Intralesional (Chalazion) Injection Upper Left Eyelid

- Chief Complaint: Existing Condition. ARMD
- History of Present Illness (HPI)
 - Location: Both Eye
 - Quality: Stable & Dry
 - Severity: Intermediate
 - Duration: 5 Years
 - Timing: Constant
 - Modifying Factors: AREDS 2 Vitamins

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ARMD Check OU & Intralesional (Chalazion) Injection Upper Left Eyelid

Primary Assessment: **H35.3132 ARMD Dry Intermediate Stage OU**
 Secondary Assessment: **H00.14 Chalazion Upper Left Eyelid**

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ARMD Check OU & Intralesional (Chalazion) Injection Upper Left Eyelid

- Exam Code-25
 - Associated Dx: H35.3132 ARMD Dry Intermediate Stage OU
- 11900-LT Chalazion Injection Left
 - Associated Dx: H00.14 Chalazion Upper Left Eyelid
- J3301-LT Triamcinolone Acetonide (1 Unit)
 - Associated Dx: H00.14 Chalazion Upper Left Eyelid

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Multiple Chalazion Injections



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Multiple Chalazion Injections



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1-7 Chalazion Injections performed on the same day get billed & paid the same ☹️

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Infiltrative Technique

- Moving needle until find pocket to inject into
- Often HARD to inject steroid into Chalazion!



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Intralesional Injections Learning Curve

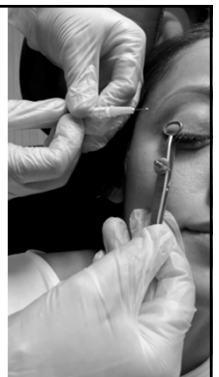
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Premature Injection



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Loose Clamp



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2 Injection Sites



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Over-Injection then Bevel NOT Up



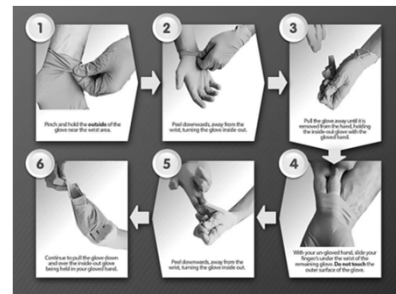
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Challenging Patient: 2 Injections



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Removal (Doffing) of Disposable Gloves



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Removal (Doffing) of Disposable Gloves

- Ensure that both gloves are inside out
- One glove enveloped inside the other
- No contaminant on the bare hands



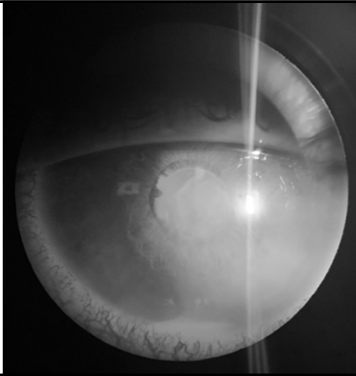
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Subconjunctival Injections

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Subconjunctival Injection Treats...

- Uveitis
- Hypopion
- Cystoid Macular Edema
- Failing trabeculectomy
- Pre/post pterygium surgery
- Anterior Scleritis
- Anesthesia
- Non-compliant patient



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Subconjunctival Injection: Diagnosis

- Exposure Keratoconjunctivitis
 - OD: H16.111
 - OS: H16.112
 - OU: H16.113
- Cicatricial Pemphigoid
 - L12.1
- Benign Neoplasm of Conjunctiva
 - OD: D31.01
 - OS: D31.02
- Conjunctival Granuloma
 - OD: H11.221
 - OS: H11.222
 - OU: H11.223
- Vascular Abnormalities of Conjunctiva
 - OD: H11.411
 - OS: H11.412
 - OU: H11.413
- Conjunctival Hyperemia
 - OD: H11.431
 - OS: H11.432
 - OU: H11.433
- Conjunctival Cysts
 - OD: H11.441
 - OS: H11.442
 - OU: H11.443
- Conjunctivochalasis
 - OD: H11.821
 - OS: H11.822
 - OU: H11.823

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Subconjunctival Injection: Potential Complications

- Hemorrhage
- Increased IOP
- Conjunctival Necrosis
- Globe perforation
- Cataract

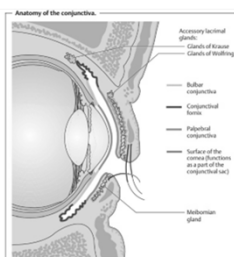
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Subconjunctival Injection

- Medication absorbs slowly
- 1ml syringe
- 27 gauge
- ½ inch needle
- .2-.5cc
 - usually closer to .2cc

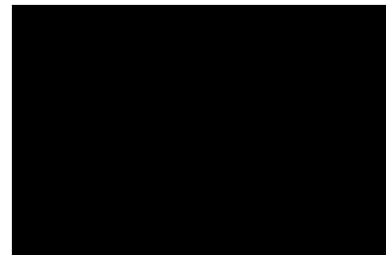
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Subconjunctival Injection: Fornix vs Tent



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Subconjunctival Injection: Fornix Method



Video courtesy of Dr. Jason Duncan & Dr. Andrew Rixon
-Southern College of Optometry Injections Course

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Subconjunctival Injection: Tent Method



Video courtesy of Dr. Jason Duncan & Dr. Andrew Rixon
-Southern College of Optometry Injections Course

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Subconjunctival Injections

- Single Subconjunctival Injection: 68200 (\$42.58)

No Global Period

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If you ONLY did a Subconjunctival Injection OD

- 68200-RT

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-50 Procedure Modifier

- Unilateral procedure performed bilaterally at the same operative session
- Reimbursed 150% of the one eye allowable fee

Use if you performed Subconjunctival injection on BOTH eyes

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Needle Sticks

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Occupational Safety and Health Administration(OSHA)

- Make rules in the workplace to prevent deaths, injuries and illness related to work



Eagle Associates, Inc.

Policy manuals, employee training and more for OSHA, HIPAA, and OIG compliance

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Handling Needles/Sharps

- Do NOT bend or re-cap contaminated needles
- NEVER reach for needles

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Needlestick Transmission Rate

- Human Immunodeficiency Virus (HIV) = 0.3%
 - Georgia = 5th Highest Rate of new HIV infections
- Hepatitis C Virus (HCV) = 2%
- Hepatitis B Virus (HBV) = 6-30%

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Exposure Control Plan

- Entire office vaccinated for Hepatitis B
- Communication of hazards to employees
- Training
- Record keeping
- Procedures for evaluating circumstances surrounding exposure incidents
- Reviewed annually

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Needlestick Protocol

1. Wash with soap and water
2. Notify supervisor
3. Detail incident in employee work-related injuries log
4. Identify the patient source
 - Employer will obtain consent to test patient for HIV, HBV & HCV
5. Go to treatment facility delegated by Workers' Compensation Insurance

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Needlestick Protocol

**Centers for Disease Control and Prevention (CDC)
Clinicians' Post Exposure Prophylaxis (PEP) Line:
1 (888) 448-4911**

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Needlestick Protocol

- Human Immunodeficiency Virus (HIV)
 - Need to start within 2 hours of exposure
 - 4 week regimen (Expensive!)
 - Zidovudine and Lamivudine (3TC)
 - 3TC and Stavudine (d4T)
 - Didanosine and d4T
- Hepatitis B Virus (HBV)
 - If prior vaccination → no treatment
 - HBIG and initiate HB vaccine series
- Hepatitis C Virus (HCV)
 - No treatment currently available

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Post-Exposure Prophylaxis (PEP) Testing

- If patient source is unknown or has Sexually Transmitted Infection
- Confidential follow-ups visits and Post-Exposure Prophylaxis (PEP) testing
 - 6 weeks
 - 3 months
 - 6 months
 - 1 year (if indicated)
- Safety measures to inhibit exposure to others until conclusion of follow-up testing
 - Ex: Safe sex

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Questions?

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