



## UEI Coding Alert #4 November 9, 2005

### Pursuing Punctum Plug Answers

CPT Code 68761 describes the insertion of punctal plugs (*closure of the lacrimal punctum; by plug, each*). Reimbursement is made per punctum and the code is repeated according to how many puncta were occluded.

Punctal occlusion with plugs for "Dry Eye Syndrome" (DES) must be supported by documentation of medical necessity in the patient's chart. Chart documentation should include:

- A complaint indicative of dry eyes (e.g., itch, burn, watery)
- Dysfunction (e.g., blurry eyes)
- Lifestyle issues (e.g., unable to see clearly to read, can't work out of doors)
- Failure of prior treatment (e.g., no relief from the use of artificial tears)
- Abnormal findings (e.g., corneal changes, staining, poor tear film)
- Results of any tests
- Diagnoses (e.g., dry eye syndrome, keratoconjunctivitis sicca, and associated systemic diseases)
- Plan (i.e., description of treatment risks and benefits)

The vast majority of patients with moderate dry eyes only require occlusion of the lower puncta. Occlusion of the upper puncta is required when severe disease is present, or for those patients who don't obtain relief following the occlusion of the lower puncta. If the upper puncta are occluded, chart notations should indicate severe disease or there was no relief following treatment of the lower puncta.

Punctal Occlusion with Plugs is considered to be minor surgery and has a 10 day postoperative period. A signed consent form is advisable before insertion. Punctal plug procedures (CPT 68761) should be reported with the proper eyelid modifier.

Eyelid Modifiers:

- E1.....Left upper eyelid
- E2.....Left lower eyelid
- E3.....Right upper eyelid
- E4.....Right lower eyelid

When a second punctal occlusion with plugs procedure is performed, in a different location, within the postoperative period of the first procedure, modifier 79 is used, in addition to the appropriate eyelid modifier, to indicate it is a separate and unrelated procedure that was performed in a different (and unrelated) location from the first procedure.

Often, the use of collagen, temporary punctal plugs prior to silicone, permanent plugs is done to see how well the plugs will work. Collagen plugs are inexpensive, but don't last long. Silicone plugs are more expensive, about \$80.00 a pair. Medicare and most HMOs reimburse for the silicone plugs. These should last 3 months, if the patient doesn't rub their eyes too much or have an anatomical problem retaining the plugs.

### Exam on Day of Procedure

The doctor may need to indicate that on the day the punctal occlusion was performed, the patient's condition required a significant, separately identifiable E&M service above and beyond the usual preoperative and postoperative care associated with the procedure. Modifier 25 would then be reported with the E & M code.

For example, modifier 25 would be appropriate if the patient is being seen in follow-up for an unrelated chronic condition such as glaucoma or a complete eye exam.