

2023 BioTissue Ocular Coding Sheets - Prokera & AmnioGraft

Physician Fee Schedule – Facility and Non-Facility Settings (CY 2023)					
		Medicare Physician Fee Schedule (MPFS)			
CDT	Descriptor	NON-	FACILITY	FA	CILITY
CPT	Descriptor	Non- Facility RVUs	National Average Payment	Facility RVUs	National Average Payment
	Placement of Pro	okera®			
65778	Placement of amniotic membrane on the ocular surface; without sutures	39.72	\$1,345.66	1.55	\$52.53
	Placement of Amni	oGraft®			
65779	Placement of amniotic membrane on the ocular surface; single layer, sutured	34.17	\$1,157.93	4.31	\$146.05
	Pterygium Procedure	al Coding			
65426	Excision or transposition of pterygium; with graft	19.93	\$674.69	14.08	\$476.45
	Conjunctival Proc	edures			
65780	Ocular surface reconstruction; amniotic membrane transplantation, multiple layers	N/A	N/A	19.71	\$667.92
68110	Excision of lesion, conjunctiva; up to 1 cm	7.06	\$239.24	4.36	\$147.75
68115	Excision of lesion, conjunctiva; over 1 cm	9.94	\$336.84	5.38	\$182.31
68320	Conjunctivoplasty; with conjunctival graft or extensive rearrangement	22.12	\$749.58	15.87	\$537.79
68326	Conjunctivoplasty, reconstruction cul-de-sac; with conjunctival graft or extensive rearrangement	NA	N/A	18.92	\$641.15
68330	Repair of symblepharon; conjunctivoplasty, <u>without</u> graft	18.53	\$627.93	13.52	\$458.15
	Glaucoma Proce	dures			
66170	Fistulization of sclera for glaucoma; trabeculectomy ab externo in absence of previous surgery	N/A	N/A	32.17	\$1,090.15
66172	Fistulization of sclera for glaucoma; trabeculectomy ab externo with scarring from previous ocular surgery or trauma (includes injection of antifibrotic agents)	N/A	N/A	35.13	\$1,190.46
66180	Aqueous shunt to extraocular equatorial plate reservoir, external approach; with graft	N/A	N/A	33.49	\$1,134.88
66185	Revision of aqueous shunt to extraocular equatorial plate reservoir; with graft	N/A	N/A	25.05	\$848.87
	Supply Code	е			
V2790	Amniotic membrane for surgical reconstruction, per procedure	N/A	N/A	N/A	Contractor Priced



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Coding Information:

<u>CPT 65426</u>: If the provider secures the amniotic membrane transplant with glue instead of using a conjunctival graft, CPT 65426 should still be reported. When reporting placement of the amniotic membrane separately, CPT 66999 should be reported if glue is used.

References:

- CY 2023 Changes to Hospital Outpatient Prospective Payment and Ambulatory Payment Systems Final Rule with Comment and Final CY 2023 Payment Rates (CMS-1772-FC); Addendum B and ASC Addenda.
- CY 2023 Payment Policies under the Physician Fee Schedule and Other Changes to Part B Payment Policies; (CMS 1772-FC); Addendum B. All MPFS Fee Schedules calculated using CF of \$33.06 effective January 1, 2023.
- Current Procedural Terminology (CPT®) is a registered trademark of the American Medical Association.
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Key to Hospital Outpatient and ASC Settings Abbreviations:

SI - Status Indicator.

APC – Ambulatory Payment Classifications.

ASC – Ambulatory Surgical Center.

OPPS - Hospital Outpatient Prospective Payment System.

Q2 - Packaged APC payment if billed on the same claim as a HCPCS code assigned status indicator "T." Otherwise, payment made through separate APC.

J1 - All covered Part B services on the claim are packaged with the primary "J1" service for the claim, except services with OPPS SI=F, G, H, L and U; ambulance services; diagnostic and screening mammography; all preventive services; and certain Part B inpatient services.

If two or more "J1" services appear on the same claim, the procedure with the higher rank based on cost is considered the "primary" service and payment is based upon the C-APC to which that service is assigned.



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In the Hospital Outpatient Prospective Payment System (OPPS), CMS assigns all CPT and HCPCS codes a Status Indicator (SI), which indicates when and how a service is considered for payment. Status indicators that apply to the procedures listed in this guide are provided below:

CPT	ty Reimbursement – Hospital Outpatient Descriptor		OPF	ASC	
J	2000pto	SI	APC	Payment	Payment
	Placement of	Prokero	g [®]		
65778	Placement of amniotic membrane on the ocular surface; without sutures	Q2	5502	\$872.64	Packaged
	Placement of An	nnioGr	aft [®]		
65779	Placement of amniotic membrane on the ocular surface; single layer, sutured	Q2	5504	\$3,495.50	Packaged
	Pterygium Pro	cedure	es		
65426	Excision or transposition of pterygium; with graft	J1	5503	\$2,114.22	\$903.48
	Conjunctival Pr	ocedu	res		
65780	Ocular surface reconstruction; amniotic membrane transplantation, multiple layers	J1	5504	\$3,495.50	\$1,805.94
68110	Excision of lesion, conjunctiva; up to 1 cm	J1	5503	\$2,114.22	\$168.61
68115	Excision of lesion, conjunctiva; over 1 cm	J1	5503	\$2,114.22	\$903.48
68320	Conjunctivoplasty; with conjunctival graft or extensive rearrangement	J1	5503	\$2,114.22	\$903.48
68326	Conjunctivoplasty, reconstruction cul-de-sac; with conjunctival graft or extensive rearrangement	J1	5504	\$3,495.50	\$1,407.02
68330	Repair of symblepharon; conjunctivoplasty, <u>without</u> graft	J1	5491	\$2,159.44	\$1,101.18
	Glaucoma Pro	cedure	es		
66170	Fistulization of sclera for glaucoma; trabeculectomy ab externo in absence of previous surgery	J1	5491	\$2,159.44	\$1,101.18
66172	Fistulization of sclera for glaucoma; trabeculectomy ab externo with scarring from previous ocular surgery or trauma (includes injection of antifibrotic agents)	J1	5491	\$2,159.44	\$1,101.18
66180	Aqueous shunt to extraocular equatorial plate reservoir, external approach; with graft	J1	5492	\$3,995.58	\$2,611.03
66185	Revision of aqueous shunt to extraocular equatorial plate reservoir; with graft	J1	5491	\$2,159.44	\$1,101.18
	Supply C	ode			
/2790	Amniotic membrane for surgical reconstruction, per procedure	N	N/A	Packaged	Packaged
				1	1



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The ICD-10 diagnostic codes listed below include only those that map to a CPT code relative to pterygium, conjunctival, or glaucoma procedure provided in the previous table. Codes ending with a "dash" mean additional digits may be required to obtain greater specificity.

elevant Ocular Diagnosis Codes				
ICD-10-CM	Description			
B94.0	Sequelae of trachoma			
C69.0-	Malignant neoplasm			
C79.49	Secondary malignant neoplasm of other parts of nervous system			
D09.2-	Carcinoma in situ			
D31.0-	Benign neoplasm of conjunctive			
D48.7	Neoplasm of uncertain behavior of other specified sites			
D49.89	Neoplasm of unspecified behavior of other specified sites			
H10.81-	Pingueculitis			
H11.00-	Unspecified pterygium			
H11.01-	Amyloid pterygium			
H11.02-	Central pterygium			
H11.03-	Double pterygium			
H11.04-	Peripheral pterygium			
H11.05-	Peripheral pterygium, progressive			
H11.44-	Conjunctival cysts			
H11.06-	Recurrent pterygium			
H11.21-	Conjunctival adhesions and strands (localized)			
H11.22-	Conjunctival granuloma			
H11.24-	Scarring of conjunctiva			
H11.44-	Conjunctival cysts			
H11.81-	Pseudopterygium of conjunctiva			
H11.82-	Conjunctivochalasis			
H16.00-	Unspecified corneal ulcer			
H16.01-	Central corneal ulcer			
H16.02-	Ring corneal ulcer			
H16.03-	Corneal ulcer with hypopyon			
H16.04-	Marginal corneal ulcer			
H16.05-	Mooren's corneal ulcer			
H16.06-	Mycotic corneal ulcer			
H16.07-	Perforated corneal ulcer			
H16.12-	Filamentary keratitis			
H16.14-	Punctate keratitis			
H16.223	Keratoconjunctivitis sicca, not specified as Sjogren's, bilateral			
H16.23-	Neurotrophic keratoconjunctivitis			
H18.1-	Bullous keratopathy			
H18.40	Unspecified corneal degeneration			
H18.41-	Arcus senilis			
H18.42-	Band keratopathy			
H18.43	Other calcerous corneal degeneration			
H18.44-	Keratomalacia			
H18.45-	Nodular corneal degeneration			
H18.46-	Peripheral corneal degeneration			

levant Ocular Diagnosis Codes		
ICD-10-CM	Description	
H18.49	Other corneal degeneration	
H18.50	Unspecified hereditary corneal dystrophies	
H18.51	Endothelial corneal dystrophy	
H18.52	Epithelial (juvenile) corneal dystrophy	
H18.53	Granular corneal dystrophy	
H18.54	Lattice corneal dystrophy	
H18.55	Macular corneal dystrophy	
H18.59	Other hereditary corneal dystrophies	
H18.73-	Descemetocele	
H18.82-	Corneal disorder due to contact lens	
H40.05-	Ocular hypertension	
H40.06-	Primary angle closure without glaucoma damage	
H40.10X-	Unspecified open-angle glaucoma	
H40.11-	Primary open-angle glaucoma	
H40.12-	Low-tension glaucoma	
H40.13-	Pigmentary glaucoma	
H4014-	Capsular glaucoma with pseudoexfoliation of lens	
H40.15-	Residual stage of open-angle glaucoma	
H40.20X-	Unspecified primary angle-closure glaucoma	
H40.22-	Chronic angle-closure glaucoma	
H40.23-	Intermittent angle-closure glaucoma	
H40.24-	Residual stage of angle-closure glaucoma	
H40.30-	Glaucoma secondary to eye trauma	
H40.40-	Glaucoma secondary to eye inflammation	
H40.50-	Glaucoma secondary to other eye disorders	
H40.60-	Glaucoma secondary to drugs	
H40.81-	Glaucoma with increased episcleral venous pressure	
H40.82-	Hypersecretion glaucoma	
H40.83-	Aqueous misdirection	
H40.89	Other specified glaucoma	
H40.9	Unspecified glaucoma	
H42	Glaucoma in diseases classified elsewhere	
H59.09-	Other disorders of the eye following cataract surgery	
L51.1	Stevens-Johnson syndrome	
Q13.1	Absence of iris	
Q15.0	Congenital glaucoma	
S05.0-	Injury of conjunctiva and corneal abrasion without foreign body	
T26.1-	Burn of cornea	
T26.6-	Corrosion of cornea and conjunctival sac	
T26.7	Corrosion with resulting rupture and destruction of eyeball	
T26.8	Corrosions of other specified parts of eye and adnexa	
T26.9	Corrosion of eye and adnexa, part unspecified	
T86.84-	Corneal transplant	

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