The reader is strongly encouraged to review federal and state laws, regulations, code sets (including ICD-9 and ICD-10), and official instructions promulgated by Medicare and other payers. This document is not an official source nor is it a complete guide on reimbursement. The reader is reminded that this information, including references and hyperlinks, changes over time, and may be incorrect at any time following publication.

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Provided Courtesy of FCI Ophthalmics

(800) 932-4202  www.fci-ophthalmics.com
REIMBURSEMENT FOR INTUBATION OF LACRIMAL CANALICULI WITH STENT

6. QUESTION: Is separate payment made for the stent?

ANSWER: No. The stent is a supply item, and considered part of the practice expense component of the professional fee. Payment made to the surgeon includes reimbursement for the stent.

7. QUESTION: What documentation is required in the medical record to support a claim for this service?

ANSWER: Medical necessity for this treatment is established following preliminary evaluation and consideration of several management options. Patients may self-refer, or be referred by an oncologist, usually due to recent onset of excessive tearing brought on by canaliculitis and lacrimal stenosis. Recent chemotherapy or radiation therapy is the proximal cause in a high percentage of patients. For some, less invasive treatment modalities such as lid massage, artificial tears, or topical anti-inflammatory medication may resolve the problem. The medical record should include an appropriate history and exam, as well as mention of any failed treatment previously attempted.

An appropriate operative report should be placed in the medical record. This includes any pre- and postoperative instructions, and a description of the procedure. A template for in-office procedures is available on our website.

8. QUESTION: Is reimbursement available for removing the stent?

ANSWER: Yes. The stent is expected to remain in place for several weeks. Use an appropriate office visit to report the removal of the stent. Do not use CPT 68530, Removal of foreign body or dacryolith, lacrimal passages.

9. QUESTION: How common is this procedure?

ANSWER: Chemotherapy is widely used to treat a variety of cancers, including GI, GU and breast tumors. Scientific papers describe epiphora and canaliculitis as a common side effect. Following 5-FU, one study reported that 39% of patients were symptomatic. Following docetaxel, another study reported that 50% of patients reported excessive tearing.

As a result, it is likely that intubation of lacrimal canalicular with stent will be a very common ophthalmic procedure. Since the Self-Retaining Bicanaliculus Intubation Stent only received FDA approval in November of 2004, there is no utilization data available as yet. Lack of a specific code to describe the procedure, and the default use of a miscellaneous code, further complicates identifying frequency.

* ICD-10 and ICD-9 codes, respectively. A dash (−) at the end of an ICD-10 code indicates that there are more digits to follow.

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