



2022

Corneal Tissue Processing and Acquisition Billing Primer

How to properly bill for reimbursement



We're Here to Help

CorneaGen is pleased to provide its customers with free reimbursement and medical claims assistance to help guide you in billing corneal tissue to your local Medicare carrier and other commercial insurance carriers. Our internal resources in conjunction with 3rd party health care consultants, will help with coding, coverage, and reimbursement inquiries.

This primer is meant to provide facilities that are performing corneal transplants with information regarding how to effectively bill for reimbursement through Medicare and commercial payers.

Check List

Eye banks are not Medicare providers and their donor tissue services are to be billed as a pass through paid at total invoice cost.

Hospitals and ambulatory surgical centers (ASCs) report Healthcare Common Procedure Coding System (HCPCS) code V2785 when billing for the costs of acquiring corneal tissue. This code includes tissue processing, laboratory tests for infectious disease, and transportation.

1. **For hospitals:** To receive cost-based reimbursement, submit charges for corneal tissue acquisition using **HCPCS code V2785** which has a Medicare Status Indicator "F" meaning that corneal tissue is not paid under OPPS but paid at reasonable cost.
2. **For ASCs: V2785** may be billed separately or as an add-on to ASC-allowable surgical procedure codes for keratoplasty. ASCs must submit an electronic or paper copy of the eye bank invoice along with the claims form. Please be aware that there are many MACs with policies in place that specifically require billing V2785 for claims reporting of corneal tissue.
3. Please be aware that **additional facility information** may be required by Medicaid or Private Payers.
4. For commercial payers, CorneaGen suggests Prior Authorization of benefits for any new facility or first-time insurer/payer to identify any reimbursement concerns prior to procedure.

To perform a **PA**, several pieces of provider/practice/facility information are required such as copies of patient's insurance card (front and back). We have developed a PA request form to assist. Link available in the Additional Resources section below.

5. We offer a proactive claim review in advance of the claim being submitted to the payer to ensure all required data is completed and included in the fields/ form locators, filled out properly / correctly on both / either the 1450 (HOPD) and / or the 1500 (ASC).

If you are experiencing any reimbursement issues or payer gaps, please reach out directly to CorneaGen at SPS@CorneaGen.com for a prompt follow up.

A simple questionnaire will be provided to collect additional information to expedite reimbursement consultation and support.

Have you considered renegotiating your commercial payer contract to improve payment for tissue?

Submit your contract for a free comprehensive review and analysis.

Billing Codes

Keratoplasty surgical codes that should include V2785	CPT
Penetrating Keratoplasty (PK) in Aphakia	65730
PK Phakic	65750
PK Pseudophakic	65755
Anterior Lamellar Keratoplasty (ALK)	65710
Endothelial Keratoplasty (EK)	65756
Keratoprosthesis	65770

Backbench Preparation

Tissue pre-cut by the eye bank includes the cost of backbench preparation in the eye bank invoice charge. Tissue preparation done by the surgeon should be reported with surgical CPT code 65757. Please note that CPT code 65757 is a (+) add on code and should be listed separately in addition to the primary CPT code for the transplant surgery.

Billing for Tissues Provided For Back Up in the Event of a Failure During Surgery

Occasionally, surgeons will request a second cornea (back up tissue) to be used in case a first transplant surgery fails. Medicare policies define how this should be reflected in coding the surgical procedures.

The first procedure is coded with modifier 74 to report the fact that it was interrupted while the patient was under anesthesia. This billing code must also account for the cornea used in the aborted procedure. It must include the V2785 item.

The second procedure is coded as normal. This procedure should include a V2785 code to account for the backup tissue. The second procedure is subject to discounting policies of the professional, OPSS, and ASC fee schedules, but the costs associated with V2785 should be fully reimbursed.

If the backup tissue is not used in surgery, it should be returned to CorneaGen and NOT be included in any procedural coding. Refer to section 40.4 in the *Medicare Claims Processing Manual*. See the Additional Resources section below.

Additional Resources

Hospital Outpatient Prospective Payment System

www.CorneaGen.com/Hospital-Outpatient-Prospective

Ambulatory Surgical Center Fee Schedule

www.CorneaGen.com/Ambulatory-Surgical-Center

The Medicare Claims Processing Manual

www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/clm104c14.pdf

Frequently Asked Questions Regarding Billing

- **Why didn't I get reimbursed for the corneal tissue?**

If you didn't get reimbursed for the corneal tissue confirm that you used V2785 for the corneal tissue. If you did use V2785 and didn't get reimbursed contact your local Surgical Product Specialist for additional support.

- **Based off prior benefits authorization the corneal tissue either is partially covered or isn't covered at all, what do I do?**

Contact your Surgical Product Specialist immediately prior to performing the transplant. Additional resources may be available to assist in this situation.

- **This primer doesn't address my specific problem. What do I do?**

If this primer doesn't address your specific reimbursement problem, complete, and submit the *Reimbursement Assistance Request Form* for further assistance.

www.CorneaGen.com/Reimbursement-Questionnaire

Disclaimer:

All customers be aware that coverage and reimbursement can change and private payer policies can be different from Medicare depending on a provider's contract. Contact payers directly for reimbursement information and instructions.