

## Utilization Analysis

**Dawn Apple, MBA, COA**  
**Chief Executive Officer**  
**Carolina Eye Associates**

**Kevin J. Corcoran, COE, CPC, CPMA, FNAO**  
**President, Corcoran Consulting Group**  
**Founder, Corcoran Compliance Connection**



## Financial Disclosure

Dawn Apple, MBA, COA

- No financial interests or relationships to disclose.

Kevin J. Corcoran is President of Corcoran Consulting Group and founder of Corcoran Compliance Connection and acknowledges a financial interest in the subject matter of this presentation.



## Progressive Corrective Action (PCA)

- Carriers auditing “outlier” practices
- Carrier informs that you are an outlier
- Carrier does not have to tell you why
- System implemented October 2000
- Eliminated random audits

Source: Part B News, November 17, 2003



## Utility of Practice Patterns

- Comparable to actuarial data, but easier to use
- Identify red flags for probable Medicare audit
- Reveal rogue physician(s)
- Target opportunities for increased revenue
- Forecasting future financial performance
- Validate practice appraisal
- Assess capital equipment purchase
- Caution statistics can mislead



## Changes to Practice Patterns Ophthalmology (18)

### Increases

- Tear osmolarity (83861) +496%
- Serial tonometry (92100) +29%
- OCT, retina (92134) +16%
- ICG (92240) +16%
- IV injection (67028) +15%
- A-scan (76510) +14%
- Topography (92025) +12%
- OCT, anterior (92132) +12%
- Cell count (92286) +11%

### Decreases

- PDT (67221) -30%
- Laser choroid (67220) -16%
- A-scan w/IOL (76519) -11%
- Cautery punctum (68760) -11%
- E/M level 2 est. (99212) -9%



Source: CMS data 2011 vs. 2012, 18 – Ophthalmology

## Top 10 Ophthalmic Procedures Medicare Utilization Patterns Ophthalmology (18)

Rank	CPT	Procedure	Rank	CPT	Procedure
1	67028	Intravitreal Injection	6	66982	Complex Cataract
2	66984	Cataract w/IOL	7	65855	Lx Trabeculoplasty
3	66821	YAG capsulotomy	8	67210	Focal Laser
4	68761	Punctum plug	9	15823	Blepharoplasty
5	67820	Epilation	10	67228	PRP

Source: CMS data 2012, 18 - Ophthalmology



## Changes to Practice Patterns Optometry (41)

### Increases

- Tear osmolarity (83861) +540%
- VEP (95930) +371%
- OCT, anterior (92132) +40%
- OCT, retina (92134) +18%
- Cell count (92286) +17%
- Topography (92025) +15%
- Orthoptic training (92065) +10%

### Decreases

- FB (65205) -16%
- Nursing home (99310) -15%



Source: CMS data 2011 vs. 2012, 41 - Optometry



## Top 10 Optometric Procedures Medicare Utilization Patterns Optometry (41)

Rank	CPT	Procedure	Rank	CPT	Procedure
1	92250	Fundus Photo	6	92226	EO, subsequent
2	92083	Perimetry	7	92020	Gonioscopy
3	92133	SCODI – nerve	8	68761	Punctum plug
4	92134	SCODI – macula	9	92285	External photo
5	92225	EO, initial	10	67820	Epilation

Source: CMS data 2012, 41 – Optometry



## Common Minor Eye Surgeries Medicare Utilization Patterns Ophthalmology (18)

CPT	Procedure	λ
67028	Intravitreal injection	11.0%
68761	Punctum occlusion, plug	1.3%
67820	Epilation, forceps	1.0%
65855	Laser trabeculoplasty	1.0%

Frequency is per 100 office visits (%) on Medicare beneficiaries

Source: CMS data (2012), 18 – Ophthalmology



## Office Visits Medicare Utilization Patterns Ophthalmology (18)

CPT	New Patients	λ	CPT	Established Patients	λ
99205	Level 5 E/M	3%	99215	Level 5 E/M	1%
99204	Level 4 E/M	29%	99214	Level 4 E/M	52%*
			92014	Comprehensive Eye	
99203	Level 3 E/M	61%*	99213	Level 3 E/M	43%*
92004	Comprehensive Eye		92012	Intermediate Eye	
99202	Level 2 E/M	6%*	99212	Level 2 E/M	4%
92002	Intermediate Eye				
99201	Level 1 E/M	<1%	99211	Level 1 E/M	<1%

\*Combined utilization of E/M and eye codes

Source: CMS data 2012, 18 - Ophthalmology



## Office Visits Medicare Utilization Patterns Ophthalmology (18)

CPT	New Patients	λ	CPT	Established Patients	λ
99203	Level 3 E/M	8%	99214	Level 4 E/M	7%
92004	Comp Eye Exam	53%	92014	Comp Eye Exam	45%
99202	Level 2 E/M	1%	99213	Level 3 E/M	13%
92002	Intermediate Eye	5%	92012	Intermediate Eye	30%

Source: CMS data 2012, 18 - Ophthalmology



## Office Visits Medicare Utilization Patterns Optometry (41)

CPT	New Patients	λ	CPT	Established Patients	λ
99205	Level 5 E/M	<1%	99215	Level 5 E/M	<1%
99204	Level 4 E/M	12%	99214	Level 4 E/M	56%*
			92014	Comprehensive Eye	
99203	Level 3 E/M	78%*	99213	Level 3 E/M	36%*
92004	Comprehensive Eye		92012	Intermediate Eye	
99202	Level 2 E/M	10%*	99212	Level 2 E/M	7%
92002	Intermediate Eye				
99201	Level 1 E/M	<1%	99211	Level 1 E/M	<1%

\*Combined utilization of E/M and eye codes

Source: CMS data 2012, 41 - Optometry



### Office Visits

#### Medicare Utilization Patterns Optometry (41)

CPT	New Patients	λ	CPT	Established Patients	λ
99203	Level 3 E/M	10%	99214	Level 4 E/M	11%
92004	Comp Eye Exam	68%	92014	Comp Eye Exam	45%
99202	Level 2 E/M	3%	99213	Level 3 E/M	19%
92002	Intermediate Eye	7%	92012	Intermediate Eye	17%

Source: CMS data 2012, 41 - Optometry



### Common Ophthalmic Tests

#### Medicare Utilization Patterns (18 - Ophthalmology)

CPT	Procedure	λ	CPT	Procedure	λ
92134	Scanning Laser (retina)	19%	92250	Fundus Photo	8%
9222x	Ext Ophthalmoscopy	18%	92235	Fluorescein	7%
9208x	Perimetry	10%	92020	Gonioscopy	3%
---	Biometry (A or OCB)	8%	76514	Pachymetry	2%
92133	Scanning Laser (glauc)	8%	92285	External Photos	1%

Frequency is per 100 office visits (%) on Medicare beneficiaries

Source: CMS data (2012), 18 - Ophthalmology



### Common Ophthalmic Tests

#### Medicare Utilization Patterns (41 - Optometry)

CPT	Procedure	λ	CPT	Procedure	λ
92250	Fundus Photo	13%	92133	Scanning Laser (glaucoma)	6%
9208x	Perimetry	10%	92134	Scanning Laser (retina)	4%
9222x	Ext Ophthalmoscopy	6%	92285	External Photo	1%
92020	Gonioscopy	2%	76514	Pachymetry	1%

Frequency is per 100 office visits (%) on Medicare beneficiaries

Source: CMS data (2012), 41 - Optometry



### Medicare Utilization Data Ophthalmology

Gonioscopy (92020)	720,528 claims	3.4%
Visual fields (9208x)	2,245,847 claims	10.5%
Fundus photos (92250)	1,670,303 claims	7.8%
IVFA (92235)	1,446,792 claims	6.7%
Ext O'scopy (9222x)	3,831,257 claims	17.8%

21.5 M Office Visits

Source: 2012 BESS data - Specialty 18, Ophthalmology



### Sample Practice Pattern Ophthalmology

Gonioscopy (92020)	99 claim	3%
Visual fields (9208x)	225 claims	7%
Fundus photos (92250)	395 claims	13%
IVFA (92235)	0 claims	0%
Ext O'scopy (9222x)	90 claims	3%

3,039 Office Visits



### Subspecialists - Office Visits New Patients

	<u>Retina</u>	<u>Oculoplastics</u>
99205 Complex	0.1%	0%
99204 Comprehensive	66.2%	14.1%
99203/92004 Detailed/Comp	9.4%	11.8%
99202/92002 EPF/ Interm	24.4%	74.2%
99201 NP PF	0%	0%



## Office Visits Established Patients

---

	<u>Glaucoma</u>	<u>Optometrists</u>
99215 Complex	0%	0%
99214/92014 Detail/Comp	12.7%	61.2%
99213/92012 EPF/ Interm	85.8%	35.3%
99212 PF	1.5%	3.5%
99201 Minimal	0%	0%



## Reasons to Analyze

---

- Compare similar specialties within practice
- Spot problems – equipment issues
- Comparative Analysis – Last Year vs. Current Year



## Analyze Your Pattern

---

	<u>You</u>	<u>MCR</u>	
Gonioscopy (92020)	3%	3%	OK
Visual fields (9208x)	7%	10%	Low
Fundus photos (92250)	13%	8%	High
IVFA (92235)	0%	7%	None
Ext O'scopy (9222x)	3%	18%	Low



## Possible Outliers

---

- Subspecialist
- Public health factors
- Research area
- Racial factors
- Geographic practice patterns
- Litigious community



## Possible Mistakes

---

- Oversimplified coding
- Overly cautious
- Hyper-aggressive
- Misunderstanding of reimbursement regulations
- Broken or missing instruments
- Inappropriate medical protocol



## Case Study Office Visits

---

- Ophthalmologist elected E/M codes exclusively
- Most ophthalmologists favor eye codes 2:1
- Challenges raised by OIG, FBI, DOJ, Medicare
- 5 year legal battle
- Physician was vindicated



### Case Study Office Visits

---

- Ophthalmologist changed code selection from 92014 to 99215
- Utilization was two standard deviations from peers
- Overpayment of \$50,000
- Initiated compliance program
  - Delighted Medicare carrier
  - Not placed on pre-payment review



### Case Study A-scan

---

- Billed 800 cataract surgeries and 400 A-scans
- Second eye was not billed for interpretation
- Captured \$11,000 in missed charges



### Case Study Glaucoma Testing

---

- 92083, 92020, 92100
- Rogue physician
- False claims
- Patients never seen
- 6,000 tests billed in 3 months
- \$500,000 overpayment



### Analyze Your Pattern

---

A utilization analysis for an ophthalmic practice revealed the following:

	<u>Practice</u>	<u>MCR</u>	
99215	0%	1%	OK
99214 / 92014	42%	52%	Low
99213 / 92012	30%	43%	Low
99212	25%	4%	High
99211	3%	>1%	High



### Analyze Your Pattern

---

Potential financial impact:

- 99212 → 99213 = \$29.38 (increase)
- 99212 → 92012 = \$43.35 (increase)
  
- 92012 → 92014 = \$39.05 (increase)
- 99213 → 99214 = \$34.75 (increase)



### Practice Patterns Summary

---

- Target opportunities for increased revenue
- Identify red flags for probable Medicare audit
- Reveal rogue physician(s)
- Forecasting future financial performance
  
- Caution statistics can mislead



### Questions...

---

Contact Information  
Dawn Apple  
(910) 295-2100  
or  
dapple@carolinaeye.com



### More help...

---

For additional assistance or confidential consultation,  
please contact Corcoran at:

(800) 399-6565  
or  
[www.CorcoranCCG.com](http://www.CorcoranCCG.com)  
[www.CorcoranC3.com](http://www.CorcoranC3.com)

