

Outpatient Facility Coding Alert

Reader Question: Refer to CMS Policy Billing for Corneal Transplant HCPCS Codes

Question: Is V2785 included in the corneal transplant code 65756?

Michigan Subscriber

Answer: In the Centers for Medicare and Medicaid Services (CMS) Manual System Transmittal #3430, CMS explains that you may bill separately for V2785 (Processing, preserving and transporting corneal tissue) when submitted alongside 65756 (Keratoplasty (corneal transplant); endothelial), among other codes. Specifically, CMS states that "corneal tissue will be separately paid when used in procedures performed in the hospital outpatient department (HOPD) only when the corneal tissue is used in a corneal transplant procedure." CMS goes on to explain that V2785 should not be used in any other circumstances.