

INTEGRATED PRIMARY EYECARE PROGRAM

SCHEDULE OF COVERED SERVICES

Effective January 1, 2022

Reimbursement is based on a minimum of the lesser of 80% of the billed amount or the maximum allowable reimbursement.

Exam Services

92002	Ophthalmological services: medical examination and evaluation with initiation of diagnostic and treatment program; intermediate, new patient
92004	Ophthalmological services: medical examination and evaluation with initiation of diagnostic and treatment program; comprehensive, new patient, 1 or more visits
92012	Ophthalmological services: medical examination and evaluation, with initiation or continuation of diagnostic and treatment program; intermediate, established patient
92014	Ophthalmological services: medical examination and evaluation, with initiation or continuation of diagnostic and treatment program; comprehensive, established patient, 1 or more visits

Evaluation and Management Services

99202	Office or other outpatient for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using time for code selection, 15-29 minutes of total time is spent on the date of the encounter.
99203	Office or other outpatient for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using time for code selection, 30-44 minutes of total time is spent on the date of the encounter.
99204	Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using time for code selection, 45-59 minutes of total time is spent on the date of the encounter.
99205	Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using time for code selection, 60-74 minutes of total time is spent on the date of the encounter.
99211	Office or other outpatient visit for the evaluation and management of an established patient, that may not require the presence of a physician or other qualified health care professional.
99212	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using time for code selection, 10-19 minutes of total time is spent on the date of the encounter.
99213	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using time for code selection, 20-29 minutes of total time is spent on the date of the encounter.

99214	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using time for code selection, 30-39 minutes of total time is spent on the date of the encounter.
99215	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using time for code selection, 40-54 minutes of total time is spent on the date of the encounter.
99241	Office consultation, new/established patient; problem-focused exam with straightforward medical decision
99242	Office consultation, new/established patient; expanded problem-focused exam with straightforward medical decision
99243	Office consultation, new/established patient; detailed exam with medical decision of low complexity
99244	Office consultation, new/established patient; comprehensive exam with medical decision of moderate complexity
99245	Office consultation, new/established patient; comprehensive exam with medical decision of high complexity

Special Ophthalmological Services

92020	Gonioscopy (separate procedure)
92025	Computerized corneal topography with interpretation and report
92060	Sensorimotor examination with multiple measurements of ocular deviation with interpretation and report (separate procedure)
92071	Fitting of contact lens for treatment of ocular surface disease
92081	Visual field exam with interpretation and report; limited
92082	Visual field exam with interpretation and report; intermediate
92083	Visual field exam with interpretation and report; extended
92100	Serial tonometry (separate procedure) multiple measure, extended period/time, with interpretation and report; same day
92132	Scanning computerized ophthalmic diagnostic imaging, anterior segment, with interpretation and report, unilateral or bilateral
92133	Scanning computerized ophthalmic diagnostic imaging, posterior segment, with interpretation and report, unilateral or bilateral; optic nerve
92134	Scanning computerized ophthalmic diagnostic imaging, posterior segment, with interpretation and report, unilateral or bilateral; retina
92136	Ophthalmic biometry by partial coherence interferometry with intraocular lens power calculation
92201	Ophthalmoscopy, extended, with retinal drawing and scleral depression of peripheral retinal disease (e.g., for retinal tear, retinal detachment, retinal tumor) with interpretation and report, unilateral or bilateral
92202	Ophthalmoscopy, extended, with drawing of optic nerve or macula (e.g., for glaucoma, macular pathology, tumor) with interpretation and report, unilateral or bilateral
92227	Remote imaging for detection of retinal disease (e.g., retinopathy in a patient with diabetes) with analysis and report under physician supervision, unilateral or bilateral

92228	Remote imaging for monitoring and management of active retinal disease (e.g., diabetic retinopathy) with physician review, interpretation and report, unilateral or bilateral
92230	Fluorescein angiography with interpretation and report
92235	Fluorescein angiography (includes multiframe imaging) with interpretation and report
92250	Fundus photography with interpretation and report
92260	Ophthalmodynamometry
92270	Electro-oculography with interpretation and report
92273	Electroretinography (ERG), with interpretation and report; full field (i.e., ffERG, flash ERG, Ganzfeld ERG)
92274	Electroretinography (ERG), with interpretation and report; multifocal (mfERG)
92283	Color vision examination, extended, e.g., anomaloscope or equivalent
92284	Dark adaptation examination with interpretation and report
92285	External ocular photography with interpretation and report for documentation of medical progress
92286	Special anterior segment photography with interpretation and report; with specular endothelial microscopy and cell count
92287	Special anterior segment photography with interpretation and report; with fluorescein angiography
95930	Visual evoked potential (VEP) checkerboard or flash testing, central nervous system except glaucoma, with interpretation and report

Eye and Ocular Adnexa Services

65205	Removal of foreign body, external eye; conjunctival superficial
65210	Removal, foreign body, external eye; conjunctival embedded/subconjunctival/scleral nonperforating
65220	Removal of foreign body, external eye; corneal, without slit lamp
65222	Removal of foreign body, external eye; corneal, with slit lamp
65430	Scraping of cornea, diagnostic, for smear and/or culture
65435	Removal, corneal epithelium; with or without chemocauterization (abrasion, curettage)
66761	Iridotomy/iridectomy by laser surgery (e.g., for glaucoma) (one or more sessions)*
66820	Discission of secondary membranous cataract; stab incision technique*
66821	Discission of secondary membranous cataract; laser surgery*
66840	Removal of lens material; aspiration technique, one or more stages*
66850	Removal of lens material; phacofragmentation technique, with aspiration*
66852	Removal of lens material; pars plana approach, with or without vitrectomy*
66920	Removal of lens material; intracapsular*

66930	Removal of lens material; intracapsular for dislocated lens*
66940	Removal of lens material; extracapsular (other than 66840, 66850, 66852)*
66982	Extracapsular cataract removal with insertion of intraocular lens prosthesis, manual or mechanical technique, complex*
66983	Intracapsular cataract extraction with insertion of intraocular lens prosthesis (one stage procedure)*
66984	Extracapsular cataract removal with insertion of intraocular lens prosthesis (one stage procedure), manual or mechanical technique*
66985	Insertion of intraocular lens prosthesis (secondary implant)*
66986	Exchange of intraocular lens*
67820	Correction of trichiasis; epilation, by forceps only
67938	Removal of embedded foreign body, eyelid
68020	Incision of conjunctiva, drainage of cyst
68040	Expression of conjunctival follicles, e.g., for trachoma
68761	Closure of the lacrimal punctum by plug, each
68801	Dilation of lacrimal punctum, with or without irrigation
68810	Probing of nasolacrimal duct, with or without irrigation
68815	Probing of nasolacrimal duct, with or without irrigation; with insertion of tube or stent
68840	Probing lacrimal canaliculi, with or without irrigation

*Co-management services that require modifier –55. Reimbursement is based on 20% of the global surgical fee.

Radiology

76510	Ophthalmic ultrasound, diagnostic; B-scan and quantitative A-scan performed during the same patient encounter
76511	Ophthalmic ultrasound, diagnostic; quantitative A-scan only
76512	Ophthalmic ultrasound, diagnostic; B-scan (with or without superimposed non-quantitative A-scan)
76513	Ophthalmic ultrasound, diagnostic; anterior segment ultrasound, immersion (water bath) B-scan or high resolution biomicroscopy
76514	Ophthalmic ultrasound, diagnostic; corneal pachymetry, unilateral or bilateral
76516	Ophthalmic biometry by ultrasound echography, A-scan
76519	Ophthalmic biometry by ultrasound echography, A-scan with intraocular lens power calculation
76529	Ophthalmic ultrasonic foreign body localization

Pathology and Laboratory

83516	Immunoassay for analyte other than infectious agent antibody or infectious agent antigen; qualitative or semiquantitative, multiple step method
83861	Microfluidic analysis utilizing an integrated collection and analysis device, tear osmolarity
87809	Infectious agent antigen detection by immunoassay with direct optical observation; Adenovirus

Miscellaneous and Other Services

99050	Service(s) provided in the office at times other than regularly scheduled office hours, or day when the office is normally closed (e.g., holidays, Saturday or Sunday, in addition to basic service)
99051	Services provided in office during regular evening, weekend or holiday office hours, in addition to basic service
99058	Office services provided on an emergency basis
99070	Supplies and materials (except spectacles), provided by the physician over and above those usually included with the office visit or other services rendered.