



IPA Par Ophthalmology Reimbursement

CMO reimburses its IPA par Ophthalmologists at a maximum per visit rate of \$212.00, for services billed during a single comprehensive eye exam.

A Comprehensive Eye exam is considered as including an initial or subsequent eye exam, including refraction and exam under anesthesia; initial or established Evaluation and Management (E&M) exam; Tonography; Visual Field tests and Ophthalmoscopy.

A Comprehensive Eye Exam will include the following individually billed services:

Procedure Code(s)	Description
92002 – 92004	Initial Eye Exam
92012 – 92020	Subsequent, including Refraction, 92015 and exam under anesthesia
92081 - 92083	Visual Field tests
92100	Serial Tonometry (separate procedure)
92201	Ophthalmoscopy, extended; with retinal drawing and scleral depression of peripheral retinal disease (eg, for retinal tear, retinal detachment, retinal tumor) with interpretation and report, unilateral or bilateral
92202	Ophthalmoscopy, extended; with drawing of optic nerve or macula (eg, for glaucoma, macular pathology, tumor) with interpretation and report, unilateral or bilateral
92225 - 92226	Ophthalmoscopy
99202 – 99205	Initial E&M (Evaluation and Management)
99211 – 99215	Established E&M
99241 – 99245	Consultations – NOT Covered. Bill with Initial or Established E&M or Initial/Subsequent Eye Exam codes.

Vision testing services not included in the above per visit fee maximum will be reimbursed at the fee for service level and pay 80% of the prevailing Bronx-based Medicare fee schedule, in addition to the per visit fee maximum.

See the next page for a listing of procedure codes and descriptions.

Continued on the next page →

IPA Par Ophthalmology Reimbursement

Procedure Code(s)	Description
76510 - 76519	Ophthalmic ultrasound
92025	Computerized Corneal Topography, unilateral or bilateral
92132	Scanning computerized ophthalmic diagnostic imaging, anterior segment
92133	Scanning computerized ophthalmic diagnostic imaging, posterior segment; optic nerve
92134	Scanning computerized ophthalmic diagnostic imaging, posterior segment; retina
92136	Ophthalmic biometry, partial coherence interferometry with IOL power calculation
92140	Provocative tests for glaucoma
92227	Remote imaging for detection of retinal disease (e.g., diabetic retinopathy), unilateral or bilateral – Medicare Non-Covered procedure; applied to all lines of business.
92228	Remote imaging for monitoring and management of active retinal disease, unilateral or bilateral
92235	Fluorescein angiography
92240	Indocyanine-green angiography
92250	Fundus Photography
92265	Needle oculoelectromyography
92270	Electro-oculography
92273 – 92274	Electroretinography (ERG), with interpretation and report; full field (i.e., ffERG, flash ERG, Ganzfeld ERG) or multifocal (mfERG)
92283	Color Vision exam, extended
92284	Dark adaptation examination
92285	External Ocular photography
92286	Special anterior segment photography
92287	Special anterior segment photography with fluorescein angiography

