

# **OPTOMETRIC PROCEDURES**

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It is the current policy of the South Carolina Board of Examiners in Optometry to accept the following procedures (by definition and by CPT code number) as within the practice of optometry at the present time (May 2021). This manual describes the procedures that an optometrist might be expected to provide as part of patient care which is both reasonable and medically indicated. These procedures when applied to patient care as described above represent the provision of health care services consistent with South Carolina law regarding the practice of optometry. An optometrist may recommend other diagnostic tests consistent with these purposes and South Carolina law when those diagnostic tests are contributory to a complete diagnosis of the vision system.

## **GENERAL OPHTHALMIC SERVICES**

### **NEW PATIENT**

- 92002** Ophthalmic services: medical examination and evaluation with initiation of diagnosis and treatment program; intermediate, new patient
- 92004** Comprehensive, new patient, one or more visits

### **ESTABLISHED PATIENT**

- 92012** Ophthalmic services: medical examination and evaluation with initiation or continuation of diagnostic and treatment program; intermediate, established patient
- 92014** Comprehensive, established patient, one or more visits

## **SPECIAL OPHTHALMIC SERVICES**

- 92015** Determination of refractive state
- 92020** Gonioscopy with medical diagnostic evaluation
- 92025** Computerized corneal topography, unilateral or bilateral, with interpretation and report
- 92060** Sensorimotor examination with multiple measurements of ocular deviation and medical diagnostic evaluation (eg., restrictive or paretic muscle with diplopia)(separate procedure)
- 92065** Orthoptic and/or pleoptic training, with continuing medical direction and evaluation
- 92071** Fitting of contact lens for treatment of ocular surface disease
- 92072** Fitting of contact lens for management of keratoconus, initial fitting
- 92082** Intermediate examination (eg., at least 2 isopters on Goldmann perimeter, or semiquantitative, automated suprathreshold screening program, Humphrey suprathreshold automatic diagnostic test, Octopus program 33)

## **SPECIAL OPHTHALMIC SERVICES (cont.)**

- 92083** Extended examination (eg., goldmann visual fields with at least 3 isopters plotted and static determination within the central 30 or quantitative, automated threshold perimetry, Octopus program G-1, 32 or 42, Humphrey visual field analyzer full threshold programs 30-2, 24-2, or 30/60-2)  
(Gross visual field testing (eg., confrontation testing) is a part of general ophthalmic services and is not reported separately)
- 92100** Serial tonometry (separate procedure) with multiple measurements of intraocular pressure over an extended time period with medical diagnostic evaluation, same day (eg., diurnal curve)
- 92132** OCT anterior segment
- 92133** OCT optic nerve with interpretation and report
- 92134** OCT retina with interpretation and report
- 92136** Interferometry with IOL calculation
- 92504** Binocular Microscopy
- 99025** Initial visit when starred surgical procedure constitutes major service at that visit

## **OPHTHALMOSCOPY**

Routine ophthalmoscopy is part of general and special ophthalmic services whenever indicated. It is a non-itemized service and is not reported separately.

- 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** With drawing of optic nerve or macula (eg, for glaucoma, macular pathology, tumor) with interpretation and report, unilateral or bilateral
- 92227** Remote imaging for detection of retinal disease
- 92228** Remote imaging for management of retinal disease
- 92230** Ophthalmoscopy, with medical diagnostic evaluation; with fluorescein angiography (observation only)
- 92235** with fluorescein angiography (includes multiframe photograph)
- 92250** with fundus photography
- 92260** with ophthalmodynamometry

## **OTHER SPECIALIZED SERVICES**

- 92265** Oculoelectromyography, one or more extraocular muscles, one or both eyes, with medical diagnostic evaluation

### **OTHER SPECIALIZED SERVICES (cont.)**

- 92270 Electro-oculography, with medical diagnostic evaluation
- 92273 Electroretinography (ERG), with interpretation and report; full field (ie, ffERG, flash ERG, Ganzfeld ERG)
- 92274 Electroretinography (ERG), with interpretation and report; multifocal (mfERG)
- 0509T Electroretinography (ERG), with interpretation and report; pattern (PERG)
- 92283 Color vision examination, extended, eg., anomaloscope or equivalent  
(Color vision testing with pseudoisochromatic plates (such as HRR or Ishihara) is not reported separately. It is included in the appropriate general or medical services)
- 92284 Dark adaptation examination, with medical diagnostic evaluation
- 92285 External ocular photography
- 0330T Tear film imaging, unilateral or bilateral, with interpretation and report (TearScience LipiView)
- 92286 Endothelial cell imaging and analysis
- 92287 Special anterior segment photography with fluorescein angiography

### **VESTIBULAR FUNCTION TESTS, WITH OBSERVATION AND EVALUATION BY PHYSICIAN/OPTOMETRIST, WITHOUT ELECTRICAL RECORDING**

- 92531 Spontaneous nystagmus, including gaze
- 92532 Positional nystagmus
- 92533 Caloric vestibular test each irrigation (binaural, bithermal stimulation constitutes four tests)
- 92534 Optokinetic nystagmus
- 92541 Spontaneous nystagmus test, including faze and fixation nystagmus, with recording
- 92542 Positional nystagmus test, minimum of 4 positions, with recording
- 92544 Optokinetic nystagmus test, bidirectional, foveal or peripheral stimulation, with recording
- 92545 Oscillating tracking test, with recording
- 92546 Torsion swing test, with recording
- 92547 Use of vertical electrodes in any or all of above test counts as one additional test

### **OPHTHALMIC TREATMENT SERVICES (SPECTACLE SERVICES)**

- 92340 Treatment with spectacles, except for aphakia; monofocal
- 92341 bifocal

## **OPHTHALMIC TREATMENT SERVICES (SPECTACLE SERVICES) (cont.)**

- 92342** multifocal, other than bifocal
- 92352** Fitting of spectacle prosthesis for aphakia, monofocal
- 92353** multifocal
- 92358** Prosthesis service for aphakia, temporary (disposable or loan, including materials)
- 92370** Repair and adjusting spectacles; except for aphakia
- 92371** spectacle prosthesis for aphakia

## **CONTACT LENS TREATMENT SERVICES**

- 92310** Prescription of optical and physical characteristics of contact lenses with medical supervision of adaptation, both eyes except for aphakia (For prescription and fitting of one eye, add modifier -52 or use 09952)
- 92311** corneal lens for aphakia, one eye
- 92312** corneal lens for aphakia, two eyes
- 92313** corneoscleral lens
- 92314** Prescription of optical and physical characteristics and management of contact lens with medical supervision of adaptation and direction of fitting by independent technician, corneal lens, both eyes except for aphakia (For prescription and fitting of one eye, add modifier -52 or use 09952.)
- 92315** corneal lens for aphakia, one eye
- 92316** corneal lens for aphakia, two eyes
- 92317** corneoscleral lens
- 92325** Modification of contact lens (separate procedure), with evaluation of adaptation
- 92326** Replacement of contact lens

## **LOW VISION TREATMENT SERVICES**

- 92354** Treatment with spectacle mounted low vision aid; single-element system
- 92355** telescopic or other compound lens system

## **VISION THERAPY SERVICES**

- 92060** Sensorimotor examination with medical diagnostic evaluation
- 92065** Orthoptic and/or pleoptic training with continuing medical direction and evaluation
- 95999** Unlisted neurological or neuromuscular diagnostic procedure

### **VISION THERAPY SERVICES (cont.)**

- 96110** Developmental testing; limited (eg, Developmental Screening Test II, Early Language Milestone Screen) with interpretation and report
- 96112** Developmental test administration by physician or other qualified healthcare professional, with interpretation and report; first hour
- 96113** each additional 30 minutes
- 96116** Neurobehavioral status exam (clinical assessment of thinking, reasoning and judgment, eg, acquired knowledge, attention, memory, visual spatial abilities, language functions, planning) with interpretation and report, first hour
- 96121** Each additional hour

### **ALLERGY TESTING**

- 95004** Percutaneous tests with allergenic extracts, immediate type reaction, specify number of tests

### **NEUROLOGY AND NEUROMUSCULAR PROCEDURES**

- 95930** Visual evoked potential (VEP) testing central nervous system, checkerboard or flash

### **LOW VISION CODES (physical medicine codes)**

- 97110** Therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility
- 97112-4** Neuromuscular Re-education (eccentric viewing training and visual scanning training)
- 97116** Neuromuscular Re-education (gait training, orientation, & mobility)
- 97530** Therapeutic activities (therapeutic activities to improve function)
- 97532** Development of cognitive skills to improve attention, memory, problem solving
  - 97533** Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands
- 97535** Training in ADLs (teaching use of devices in activities of daily living)
- 97537** Community re-integration training (teaching use of devices & techniques outside the home)
- 97750** Visual performance testing (reading testing and visual tracking)

### **UNLISTED SERVICE**

- 92499** Unlisted ophthalmic procedure
- 0507T** Near infrared dual imaging, meibography

## **UNLISTED SERVICE (cont.)**

**0506T** Macular pigment optical density measurement

**0402T** Cornea crosslinking

**17999** Unlisted procedure, skin, mucous membrane and subcutaneous tissue (IPL)

## **PREVENTIVE MEDICINE**

### **NEW**

**99381** Initial evaluation and management, comprehensive history and examination, identification of risk factors, and ordering of lab/diagnostic procedures; infant under 1 year

**99382** early childhood (age 1 through 4 years)

**99383** late childhood (age 5 through 11 years)

**99384** adolescent (age 12 through 17 years)

**99385** 18-39 years

**99386** 40-64 years

**99387** 65 years and over

### **ESTABLISHED**

**99391** Reevaluation and management requiring comprehensive history and examination, identification of risk factors, and ordering of lab/diagnostic procedures; infant under 1 year

**99392** early childhood (age 1 through 4 years)

**99393** late childhood (age 5 through 11 years)

**99394** adolescent (age 12 through 17 years)

**99395** 18-39 years

**99396** 40-64 years

**99397** 65 years and over

### **INDIVIDUAL**

**99401** Counseling and/or risk factor reduction intervention(s); approx. 15 minutes

**99402** approx. 30 minutes

**99403** approx. 45 minutes

**99404** approx. 60 minutes

## **GROUP**

- 99411** Counseling and/or risk factor reduction intervention(s) in a group setting; approx. 30 minutes
- 99412** approx. 60 minutes

## **OTHER PREVENTIVE MEDICINE SERVICES**

- 96160** Administration of patient-focused health risk assessment instrument (e.g., health hazard appraisal) with scoring and documentation, per standardized instrument
- 96161** Administration of caregiver-focused health risk assessment instrument (e.g., depression inventory) for the benefit of the patient, with scoring and documentation, per standardized instrument
- 99429** Unlisted preventive medicine service
- 99499** Unlisted evaluation and management service

## **CONSULTATIONS OUTPATIENT**

- 99241** Office consultation for new or established patient requiring: a problem focused history; a problem focused examination; and straightforward medical decision making **99242** requiring: an expanded problem focused history; an expanded problem focused examination; and straightforward medical decision making
- 99243** requiring: a detailed history; a detailed examination; and medical decision making of low complexity
- 99244** requiring: a comprehensive history; a comprehensive examination; and medical decision making of moderate complexity
- 99245** requiring: a comprehensive history; a comprehensive examination; and medical decision making of high complexity

## **PROLONGED SERVICES**

- 99354** Prolonged service in the office or other outpatient setting; requiring direct patient contact beyond the usual service; first hour (List separately in addition to code for office or other outpatient Evaluation and Management service).
- 99355** Prolonged service in the office or other outpatient setting; requiring direct patient contact beyond the usual service; each additional 30 minutes (List separately in addition to code for prolonged service).
- 99358** Prolonged evaluation and management service; before and/or after direct patient care; first hour
- 99359** Prolonged evaluation and management service: before and/or after direct patient care; each additional 30 minutes (List separately in addition to code for prolonged service).

## **INPATIENT INITIAL**

- 99251** Initial inpatient consultation for a new or established patient requiring: a problem focused history; a problem focused examination; and straightforward medical decision making
- 99252** requiring: an expanded problem focused history; an expanded problem focused examination; and straightforward medical decision making
- 99253** requiring: a detailed history; a detailed examination; and medical decision making of low complexity
- 99254** requiring: a comprehensive history; a comprehensive examination; and medical decision making of moderate complexity
- 99255** requiring: a comprehensive history; a comprehensive examination; and medical decision making of high complexity

## **POSTOPERATIVE CARE SERVICES (Must be submitted with Modifier 55)**

- 65771** Post-op Radial Keratotomy
- 65855** Post-op Trabeculoplasty by laser surgery, one or more sessions
- 66821** Post-op YAG Capsulotomy
- 66850** Phacofragmentation technique
- 66982** Post-op Extracapsular cataract removal with insertion of intraocular lens, complex
- 66983** Post-op Intracapsular cataract extraction with insertion of intraocular lens
  - 66984** Post-op Extracapsular cataract removal with insertion of intraocular lens
  - 66985** Post-op, Secondary implant
- 66986** Exchange of intraocular lens
- 66940** Extracapsular, other

## **EXTERNAL EYE SERVICES**

- 65205** Removal of foreign body conjunctival, superficial
- 65210** Removal of foreign body conjunctival, embedded
- 65220** Removal of foreign body corneal, without slit lamp
- 65222** Removal of foreign body corneal, with slit lamp
- 65430** Scraping of corneal, diagnostic, for smear and/or culture
- 65435** Removal of corneal epithelium; with or without chemocauterization (abrasion, curettage.)
- 65600** Anterior Stromal Puncture
- 65778** Placement of amniotic membrane on the ocular surface; without sutures

## **EXTERNAL EYE SERVICES (cont.)**

- 67700** Blepharotomy, drainage of abscess, eyelid
  - 67820** Correction of trichiasis; epilation, by forceps only
  - 67850** Destruction of lesion at lid margin (up to 1 cm)
  - 67938** Removal of embedded foreign body, eyelid
  - 67840** Excision of lesion of eyelid without closure
  - 68020** Incision of Conjunctiva, drainage of cyst
  - 68040** Expression of conjunctival follicles
  - 68761** Closure of lacrimal punctum by plug, each. (This is under Lacrimal System - Repair)
  - 68800** Dilation of lacrimal punctum, with or without irrigation (To report a bilateral procedure, use 68801 with modifier -50 or 09950)
  - 68810** Probing of nasolacrimal duct with or without irrigation
  - 68820** Probing of nasolacrimal duct, with or without irrigation, unilateral or bilateral
  - 68830** Naso-lacrimal duct probe with insertion of stent or tube
  - 68840** Probing of lacrimal canaliculi, with or without irrigation
  - 68899** otherwise unlisted
  - 95060** Ophthalmic mucous membrane tests
- (This code is also associated with procedure code 375.15 which is also with the scope of practice of optometry. 375.15 Tear film insufficiency, unspecified: Dry eye syndrome.)

## **OFFICE SERVICES**

### **NEW PATIENT**

- 99202** requiring: an expanded problem focused history; an expanded problem focused examination; and straightforward medical decision making
- 99203** requiring: a detailed history; a detailed examination; and medical decision making of low complexity
- 99204** requiring: a comprehensive history; a comprehensive examination; and medical decision making of moderate complexity
- 99205** requiring: a comprehensive history; a comprehensive examination; and medical decision making of high complexity

### **ESTABLISHED PATIENT**

- 99211** Evaluation and management that may not require the presence of a physician; presenting problems minimal

### **ESTABLISHED PATIENT (cont.)**

- 99212** Evaluation and management requiring: a problem focused history; a problem focused examination; straightforward medical decision making. Problems self limited or minor
- 99213** requiring: an expanded problem focused history; an expanded problem focused examination; medical decision making of low complexity
- 99214** requiring: a detailed history; a detailed examination; medical decision making of moderate complexity
- 99215** requiring: a comprehensive history; a comprehensive examination; medical decision making of high complexity

### **HOME SERVICES**

#### **NEW PATIENT**

- 99341** Home visit for evaluation and management requiring: a problem focused history; a problem focused examination; and medical decision making that is straightforward or of low complexity
- 99342** requiring: an expanded problem focused history; an expanded problem focused examination; and medical decision making of moderate complexity
- 99343** requiring: a detailed history; a detailed examination; and medical decision making of high complexity

#### **ESTABLISHED PATIENT**

- 99347** Home visit for evaluation and management requiring at least two of these components: a problem focused interval history; a problem focused examination; medical decision making that is straightforward or of low complexity
- 99348** requiring at least two of these components: an expanded problem focused interval history; an expanded problem focused examination; medical decision making of moderate complexity
- 99349** requiring at least two of these components: a detailed interval history; a detailed examination; medical decision making of high complexity
- 99350** requiring at least two of these components: a comprehensive interval history; a comprehensive examination; medical decision making of moderate to high complexity

### **SKILLED NURSING, INTERMEDIATE CARE, AND LONG-TERM CARE FACILITIES**

#### **SUBSEQUENT CARE: NEW OR ESTABLISHED PATIENT**

## **NURSING HOME, BOARDING HOME, DOMICILIARY, OR CUSTODIAL CARE MEDICAL SERVICES**

Domiciliary or custodial care involves periodic services, provided to a patient who is institutionalized on a long-term basis.

### **DIAGNOSTIC ULTRASOUND SERVICES**

- 76511** Ophthalmic ultrasound, echography; A-mode, spectral analysis with amplitude quantification
- 76512** Contact B-scan (with or without simultaneous A-scan)
- 76513** Anterior segment ultrasound / Immersion B-scan / High-Resolution biomicroscopy
- 76514** Determination of corneal thickness (e.g. pachometry) with interpretation and report, bilateral
- 76516** Ophthalmic biometry by ultrasound echography, A-mode
- 76519** with intraocular lens power calculation
- 76529** Ophthalmic ultrasonic foreign body localization

### **BIOFEEDBACK SERVICES**

- 90901** Biofeedback training; by electro-myogram application (eg., in tension headache, muscle spasm)

### **MICROBIOLOGY SERVICES**

- 83861** Microfluidic analysis utilizing an integrated collection and analysis device, tear osmolarity
- 87071** Microbiology, quantitative, aerobic with isolation and presumptive identification, from any source except urine, blood, or stool
- 87075** Culture, bacterial, any source; anaerobic (isolation)
- 87181** Sensitivity studies, antibiotic, agar diffusion method, per antibiotic
- 87205** Smear, primary source, with interpretation; routine stain for bacteria, fungi, or cell types

### **E/M CODES - HOSPITAL INPATIENT NEW PATIENT**

- 99221** Initial hospital care for evaluation and management requiring: a comprehensive history; a comprehensive examination; and medical decision making that is straightforward or of low complexity.
- 99222** requiring: a comprehensive history; a comprehensive examination; and medical decision making of moderate complexity.

## **E/M CODES - HOSPITAL INPATIENT NEW PATIENT (cont.)**

**99223** requiring: a comprehensive history; a comprehensive examination; and medical decision making of high complexity.

## **SUBSEQUENT HOSPITAL CARE**

**99231** Subsequent hospital care for evaluation and management requiring two of the following: a problem focused interval history; a problem focused examination; medical decision making that is straightforward or of low complexity.

**99232** requiring two of the following: an expanded problem focused interval history; an expanded problem focused examination; medical decision making of moderate complexity.

**99233** requiring two of the following: a detailed interval history; a detailed examination; medical decision making of high complexity.

## **HOSPITAL DISCHARGE SERVICES**

**99238** Hospital discharge day management

## **EMERGENCY DEPARTMENT SERVICES**

**99281** Emergency department visit for the evaluation and management requiring: a problem focused history; a problem focused examination; and straightforward medical decision making.

**99282** requiring: an expanded problem focused history; an expanded problem focused examination; and medical decision making of low complexity.

**99283** requiring: an expanded problem focused history; an expanded problem focused examination; and medical decision making of low to moderate complexity.

**99284** requiring: a detailed history; a detailed examination; and medical decision making of moderate complexity.

**99285** requiring: a comprehensive history; a comprehensive examination; and medical decision making of high complexity

## **SPECIAL SERVICES AND REPORTS**

### **ADMINISTRATIVE SERVICES**

**99000** Handling, and/or conveyance of specimen for transfer from the doctor's office to a laboratory

**99001** Handling, and/or conveyance of specimen for transfer from the patient's home to a laboratory (distance may be indicated)

## **ADMINISTRATIVE SERVICES (cont.)**

- 99002** Handling, conveyance, and/or any other service in connection with the implementation of an order involving devices (eg., designing, fitting, packaging, handling, delivery or mailing) when devices such as orthoptics, protectives, prosthetics are fabricated by an outside laboratory or shop but which items have been designed and are to be fitted and adjusted by the attending provider
- 99024** Postoperative follow-up visit, included in global service
- 99050** Services requested after office hours in addition to basic service
- 99053** Services requested between 10:00 PM and 8:00 AM at a 24 hour facility in addition to basic service
- 99056** Services provided at request of patient in a location other than optometrists's office which are normally provided in the office
- 99058** Office services provided on an emergency basis
- 99070** Supplies and materials (except spectacles) provided by the optometrists over and above those usually included with the office visit or other services rendered (list materials provided)
- 99071** Educational supplies, such as books, tapes, and pamphlets, provided by the optometrist for the patient's medical education at cost to optometrist
- 99075** Medical testimony as an optometrist
- 99078** Medical education services rendered to patients in a group setting
- 99080** Special reports as insurance forms, or the review of medical data to clarify a patient's status - more than the information conveyed in the usual medical communications or standard reporting form
- 99082** Unusual travel (eg., transportation and escort of patient)
- 99090** Analysis of information data stored in computers

## **TEAM CONFERENCES**

- 99366** Medical team conference in which a non-physician spends 30 minutes or more of face-to-face time with the patient and/or family;
- 99367** Medical team conference in which a physician spends 30 minutes or more, not face-to-face with the patient and/or family; and
- 99368** Medical team conference where a non-physician spends 30 minutes or more, not face-to-face with the patient and/or family

## **TELEPHONE CALLS**

**99371** Telephone call by a physician to patient or for consultation or medical management or for coordinating medical management with other health care professionals; simple or brief

**99372** intermediate

**99373** complex or lengthy

## **MODIFIERS**

**-21 or 09921** prolonged evaluation and management services

**-22 or 09922** unusual procedural services

**-24 or 09924** unrelated E/M service/same physician/during post-op

**-25 or 09925** significant, separately identifiable evaluation and management service by the same physician on the day of a procedure

**-26 or 09926** profession component

**-27 or 09927** multiple Outpatient Hospital E/M Encounters on the Same Date

**-32 or 09932** mandated services

**-33 or 09933** preventative service

**-50 or 09950** bilateral procedure

**-51 or 09951** multiple procedures

**-52 or 09952** reduced services

**-55 or 09955** post-operative management only\*

**-56 or 09956** pre-operative management only

**-76 or 09976** repeat procedure/same physician

**-77 or 09977** repeat procedure/different physician

**-79 or 09979** unrelated proc/service/same phys/post-op

**-90 or 09990** reference lab (i.e., visual fields but not interpreted for another doctor)

**-99 or 09999** multiple modifiers

\* "-55" or "-56" may be used with any ophthalmic surgical procedure

**0517F** Primary Open Angle Glaucoma: Glaucoma plan of care documented

**1055F** Cataracts: assessment of visual functional status

**2019F** ARMD: Dilated Macular Examination

**2020F** Cataracts: Pre-Surgical Dilated Fundus Evaluation

**2021F** Diabetic retinopathy: documentation of presence or absence of macular edema and level of severity of retinopathy

**MODIFIERS (cont.)**

- 2027F** Primary Open Angle glaucoma: Optic nerve Evaluation
- 3073F** Cataracts: documentation of pre-surgical axial length, corneal power measurement and method of intraocular lens power calculation
- 3284F** Primary Open Angle Glaucoma: Intraocular pressure (IOP) reduced by a value of greater than or equal to 15% from the pre-intervention level
- 3285F** Primary Open Angle Glaucoma: Intraocular pressure (IOP) reduced by a value less than 15% from the pre-intervention level
- 4007F ARMD: AREDS prescribed / recommended**
- 4174F** Primary Open-Angle Glaucoma: Counseling on Glaucoma
- 4177F** Age- Related Macular Degeneration (AMD): Counseling on Antioxidant Supplement
- 5010F** Diabetic retinopathy : communication with the physician managing ongoing diabetes care
- 0198T** Measurement of ocular blood flow by repetitive intraocular pressure sampling, with interpretation and report