

Clinical Policy: Extended Ophthalmoscopy

Reference Number: WNC.CP.180

Last Review Date: 08/24

[Coding Implications](#)

[Revision Log](#)

See [Important Reminder](#) at the end of this policy for important regulatory and legal information.

Note: When state Medicaid coverage provisions conflict with the coverage provisions in this clinical policy, state Medicaid coverage provisions take precedence. Please refer to the state Medicaid manual for any coverage provisions pertaining to this clinical policy.

Description

Extended ophthalmoscopy is a method of examining the posterior portion of the eye when the level of examination requires a complete view of the back of the eye and documentation is greater than that required during routine ophthalmoscopy. This policy describes the medical necessity guidelines for extended ophthalmoscopy.

Policy/Criteria

- I. It is the policy of WellCare of North Carolina® that extended ophthalmoscopy is **medically necessary** for the following indications:
 - A. Infants undergoing treatment and/or monitoring of retinopathy of prematurity;
 - B. Histoplasmosis;
 - C. Choroidal neoplasms;
 - D. Glaucoma;
 - E. Optic nerve pathology;
 - F. Diabetic retinopathy;
 - G. Hypertensive retinopathy;
 - H. Vascular occlusion;
 - I. Retinal neovascularization;
 - J. Macular pathology;
 - K. Retinal tear, thinning, schisis or detachment;
 - L. Hereditary retinal dystrophies; **or**
 - M. Other visible retinal disorders requiring detailed imaging for adequate documentation.

- II. It is the policy of WellCare of North Carolina® that extended ophthalmoscopy is **not medically necessary** under the following situations:
 - A. Routine replacement of standard ophthalmoscopy with extended ophthalmoscopy to document the appearance of healthy retinal anatomy;
 - B. Duplicative documentation of retinal pathology with extended ophthalmoscopy in conjunction with fundus photography, fluorescein angiography, etc., unless the additional diagnostic procedures provide new information to assist in clinical decision-making.

- C. Repeated performance in the presence of controlled and/or stable disease.

Background

Extended ophthalmoscopy allows a complete view of the back of the eye. After the pupils have been dilated, views of the retina are seen with the direct ophthalmoscope, the indirect ophthalmoscope, or both. Extended ophthalmoscopy may be indicated for a wide range of posterior segment pathology. This inspection permits visualization of the optic disk, arteries, veins, retina, choroid, and media. It is usually performed with the pupil dilated, to ensure optimal examination of the retina, utilizing indirect ophthalmoscopy. It may also be performed using contact lens biomicroscopy and may use scleral depression. It is performed by the physician when a more detailed examination (including that of the periphery) is needed, following routine ophthalmoscopy.

The direct ophthalmoscope allows the highly magnified view of the posterior portion of the retina; indirect gives a broader view that includes posterior and anterior retina and vitreous. Extended ophthalmoscopy can also be performed with a contact lens, H-ruby lens, or 90-diopter lens. One or both eyes are viewed and the duly licensed eye care provider makes a detailed drawing of views of the patient's retinas and their defects.

Extended ophthalmoscopy includes a detailed retinal drawing, (disc, macula or periphery) accompanied by an interpretation and report. The drawing should be anatomically specific to the patient and clearly labeled, and be of sufficient size, no less than 3-4 inches in diameter. The extensive scaled drawing must accurately represent normal, abnormal and common findings such as lattice degeneration, hypertensive vascular changes, proliferative diabetic retinopathy, retinal detachments, holes, tears, or tumors. Where extended ophthalmoscopy is used in defining optic nerve changes, ancillary drawings of cup to disc data elements (size, depth, rim, vessels, coloration) are required. Fundus examination elements (disc, macula, vessels, and periphery) cannot be used to simultaneously satisfy documentation requirements of evaluation and management (E&M) or eye services and extended ophthalmoscopy. Periodic comprehensive medical eye examinations are recommended in adults without known ocular conditions or risk factors in an effort to detect ocular disease and provide early treatment, thereby preserving visual function. They are also performed periodically to evaluate new symptoms and monitor patients with previously identified eye conditions or risk factors. A comprehensive ophthalmologic evaluation may also be useful in the initial diagnosis of a number of systemic diseases such as hypertension, diabetes mellitus, and infectious diseases. Routine ophthalmoscopy is part of general and special ophthalmologic services when indicated and is useful for viewing the vitreous humor, retina, optic nerve, retinal veins and arteries, and associated structures.

Coding Implications

This clinical policy references Current Procedural Terminology (CPT®). CPT® is a registered trademark of the American Medical Association. All CPT codes and descriptions are copyrighted 2024, American Medical Association. All rights reserved. CPT codes and CPT descriptions are from the current manuals and those included herein are not intended to be all-inclusive and are

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included for informational purposes only. Codes referenced in this clinical policy are for informational purposes only. Inclusion or exclusion of any codes does not guarantee coverage. Providers should reference the most up-to-date sources of professional coding guidance prior to the submission of claims for reimbursement of covered services.

CPT®* Codes	Description
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

ICD-10-CM Diagnosis Codes that Support Coverage Criteria

+ Indicates a code(s) requiring an additional character

ICD-10- CM Code	Description
A18.53	Tuberculous chorioretinitis
A18.54	Tuberculous iridocyclitis
B39.4	Histoplasmosis capsulati, unspecified
B39.5	Histoplasmosis duboisii
B58.01	Toxoplasma chorioretinitis
C69.21	Malignant neoplasm of right retina
C69.22	Malignant neoplasm of left retina
C69.31	Malignant neoplasm of right choroid
C69.32	Malignant neoplasm of left choroid
C69.41	Malignant neoplasm of right ciliary body
C69.42	Malignant neoplasm of left ciliary body
C72.31	Malignant neoplasm of right optic nerve
C72.32	Malignant neoplasm of left optic nerve
C72.59	Malignant neoplasm of other cranial nerves
D31.21	Benign neoplasm of right retina
D31.22	Benign neoplasm of left retina
D31.31	Benign neoplasm of right choroid
D31.32	Benign neoplasm of left choroid
D31.41	Benign neoplasm of right ciliary body
D31.42	Benign neoplasm of left ciliary body
D33.3	Benign neoplasm of cranial nerves
E08.3211	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, right eye

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ICD-10- CM Code	Description
E08.3212	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, left eye
E08.3213	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3291	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, right eye
E08.3292	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, left eye
E08.3293	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3311	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E08.3312	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E08.3313	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3391	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E08.3392	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E08.3393	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3411	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, right eye
E08.3412	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, left eye
E08.3413	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3491	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, right eye
E08.3492	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, left eye
E08.3493	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3511	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, right eye
E08.3512	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, left eye

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ICD-10- CM Code	Description
E08.3513	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, bilateral
E08.3521	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
E08.3522	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
E08.3523	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
E08.3531	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
E08.3532	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
E08.3533	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
E08.3541	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
E08.3542	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
E08.3543	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
E08.3551	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, right eye
E08.3552	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, left eye
E08.3553	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, bilateral
E08.3591	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, right eye
E08.3592	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, left eye
E08.3593	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, bilateral
E08.37X1	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, right eye
E08.37X2	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, left eye

ICD-10- CM Code	Description
E08.37X3	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, bilateral
E09.3211	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E09.3212	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E09.3213	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3291	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E09.3292	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E09.3293	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E09.3311	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E09.3312	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E09.3313	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3391	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E09.3392	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E09.3393	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E09.3411	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E09.3412	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E09.3413	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3491	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E09.3492	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E09.3493	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral

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ICD-10- CM Code	Description
E09.3511	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E09.3512	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E09.3513	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E09.3521	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
E09.3522	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
E09.3523	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
E09.3531	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
E09.3532	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
E09.3533	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
E09.3541	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
E09.3542	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
E09.3543	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
E09.3551	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, right eye
E09.3552	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, left eye
E09.3553	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
E09.3591	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E09.3592	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E09.3593	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral

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ICD-10- CM Code	Description
E09.37X1	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
E09.37X2	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
E09.37X3	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
E10.3211	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E10.3212	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E10.3213	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3291	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E10.3292	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E10.3293	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3311	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E10.3312	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E10.3313	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3391	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E10.3392	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E10.3393	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3411	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E10.3412	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E10.3413	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3491	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye

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ICD-10- CM Code	Description
E10.3492	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E10.3493	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3511	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E10.3512	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E10.3513	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E10.3521	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
E10.3522	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
E10.3523	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
E10.3531	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
E10.3532	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
E10.3533	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
E10.3541	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
E10.3542	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
E10.3543	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
E10.3551	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, right eye
E10.3552	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, left eye
E10.3553	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
E10.3591	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E10.3592	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E10.3593	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral

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ICD-10- CM Code	Description
E10.37X1	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
E10.37X2	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
E10.37X3	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
E11.3211	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E11.3212	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E11.3213	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3291	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E11.3292	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E11.3293	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3311	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E11.3312	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E11.3313	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3391	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E11.3392	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E11.3393	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3411	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E11.3412	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E11.3413	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3491	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye

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ICD-10- CM Code	Description
E11.3492	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E11.3493	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3511	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E11.3512	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E11.3513	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E11.3521	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
E11.3522	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
E11.3523	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
E11.3531	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
E11.3532	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
E11.3533	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
E11.3541	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
E11.3542	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
E11.3543	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
E11.3551	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, right eye
E11.3552	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, left eye
E11.3553	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
E11.3591	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E11.3592	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E11.3593	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral

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ICD-10- CM Code	Description
E11.37X1	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
E11.37X2	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
E11.37X3	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
E13.3211	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E13.3212	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E13.3213	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3291	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E13.3292	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E13.3293	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3311	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E13.3312	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E13.3313	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3391	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E13.3392	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E13.3393	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3411	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E13.3412	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E13.3413	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3491	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye

ICD-10- CM Code	Description
E13.3492	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E13.3493	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3511	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E13.3512	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E13.3513	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E13.3521	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
E13.3522	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
E13.3523	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
E13.3531	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
E13.3532	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
E13.3533	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
E13.3541	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
E13.3542	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
E13.3543	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
E13.3551	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, right eye
E13.3552	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, left eye
E13.3553	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
E13.3591	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye

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ICD-10- CM Code	Description
E11.3592	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E13.3593	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
G45.3	Amaurosis fugax
H15.031	Posterior scleritis, right eye
H15.032	Posterior scleritis, left eye
H15.033	Posterior scleritis, bilateral
H16.241	Ophthalmia nodosa, right eye
H16.242	Ophthalmia nodosa, left eye
H16.243	Ophthalmia nodosa, bilateral
H20.011	Primary iridocyclitis, right eye
H20.012	Primary iridocyclitis, left eye
H20.013	Primary iridocyclitis, bilateral
H20.021	Recurrent acute iridocyclitis, right eye
H20.022	Recurrent acute iridocyclitis, left eye
H20.023	Recurrent acute iridocyclitis, bilateral
H20.031	Secondary infectious iridocyclitis, right eye
H20.032	Secondary infectious iridocyclitis, left eye
H20.033	Secondary infectious iridocyclitis, bilateral
H20.041	Secondary noninfectious iridocyclitis, right eye
H20.042	Secondary noninfectious iridocyclitis, left eye
H20.043	Secondary noninfectious iridocyclitis, bilateral
H20.11	Chronic iridocyclitis, right eye
H20.12	Chronic iridocyclitis, left eye
H20.13	Chronic iridocyclitis, bilateral
H20.21	Lens-induced iridocyclitis, right eye
H20.22	Lens-induced iridocyclitis, left eye
H20.23	Lens-induced iridocyclitis, bilateral
H20.811	Fuchs' heterochromic cyclitis, right eye
H20.812	Fuchs' heterochromic cyclitis, left eye
H20.813	Fuchs' heterochromic cyclitis, bilateral
H20.821	Vogt-Koyanagi syndrome, right eye
H20.822	Vogt-Koyanagi syndrome, left eye
H20.823	Vogt-Koyanagi syndrome, bilateral
H21.01	Hyphema, right eye
H21.02	Hyphema, left eye

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ICD-10- CM Code	Description
H21.03	Hyphema, bilateral
H21.301	Idiopathic cysts of iris, ciliary body or anterior chamber, right eye
H21.302	Idiopathic cysts of iris, ciliary body or anterior chamber, left eye
H21.303	Idiopathic cysts of iris, ciliary body or anterior chamber, bilateral
H21.311	Exudative cysts of iris or anterior chamber, right eye
H21.312	Exudative cysts of iris or anterior chamber, left eye
H21.313	Exudative cysts of iris or anterior chamber, bilateral
H21.321	Implantation cysts of iris, ciliary body or anterior chamber, right eye
H21.322	Implantation cysts of iris, ciliary body or anterior chamber, left eye
H21.323	Implantation cysts of iris, ciliary body or anterior chamber, bilateral
H21.331	Parasitic cyst of iris, ciliary body or anterior chamber, right eye
H21.332	Parasitic cyst of iris, ciliary body or anterior chamber, left eye
H21.333	Parasitic cyst of iris, ciliary body or anterior chamber, bilateral
H21.341	Primary cyst of pars plana, right eye
H21.342	Primary cyst of pars plana, left eye
H21.343	Primary cyst of pars plana, bilateral
H21.351	Exudative cyst of pars plana, right eye
H21.352	Exudative cyst of pars plana, left eye
H21.353	Exudative cyst of pars plana, bilateral
H21.531	Iridodialysis, right eye
H21.532	Iridodialysis, left eye
H21.533	Iridodialysis, bilateral
H21.541	Posterior synechiae (iris), right eye
H21.542	Posterior synechiae (iris), left eye
H21.543	Posterior synechiae (iris), bilateral
H21.551	Recession of chamber angle, right eye
H21.552	Recession of chamber angle, left eye
H21.553	Recession of chamber angle, bilateral
H27.111	Subluxation of lens, right eye
H27.112	Subluxation of lens, left eye
H27.113	Subluxation of lens, bilateral
H27.131	Posterior dislocation of lens, right eye
H27.132	Posterior dislocation of lens, left eye
H27.133	Posterior dislocation of lens, bilateral
H30.011	Focal chorioretinal inflammation, juxtapapillary, right eye
H30.012	Focal chorioretinal inflammation, juxtapapillary, left eye
H30.013	Focal chorioretinal inflammation, juxtapapillary, bilateral

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EXTENDED OPHTHALMOSCOPY



ICD-10- CM Code	Description
H30.021	Focal chorioretinal inflammation of posterior pole, right eye
H30.022	Focal chorioretinal inflammation of posterior pole, left eye
H30.023	Focal chorioretinal inflammation of posterior pole, bilateral
H30.031	Focal chorioretinal inflammation, peripheral, right eye
H30.032	Focal chorioretinal inflammation, peripheral, left eye
H30.033	Focal chorioretinal inflammation, peripheral, bilateral
H30.041	Focal chorioretinal inflammation, macular or paramacular, right eye
H30.042	Focal chorioretinal inflammation, macular or paramacular, left eye
H30.043	Focal chorioretinal inflammation, macular or paramacular, bilateral
H30.111	Disseminated chorioretinal inflammation of posterior pole, right eye
H30.112	Disseminated chorioretinal inflammation of posterior pole, left eye
H30.113	Disseminated chorioretinal inflammation of posterior pole, bilateral
H30.121	Disseminated chorioretinal inflammation, peripheral right eye
H30.122	Disseminated chorioretinal inflammation, peripheral, left eye
H30.123	Disseminated chorioretinal inflammation, peripheral, bilateral
H30.131	Disseminated chorioretinal inflammation, generalized, right eye
H30.132	Disseminated chorioretinal inflammation, generalized, left eye
H30.133	Disseminated chorioretinal inflammation, generalized, bilateral
H30.141	Acute posterior multifocal placoid pigment epitheliopathy, right eye
H30.142	Acute posterior multifocal placoid pigment epitheliopathy, left eye
H30.143	Acute posterior multifocal placoid pigment epitheliopathy, bilateral
H30.21	Posterior cyclitis, right eye
H30.22	Posterior cyclitis, left eye
H30.23	Posterior cyclitis, bilateral
H30.811	Harada's disease, right eye
H30.812	Harada's disease, left eye
H30.813	Harada's disease, bilateral
H31.011	Macula scars of posterior pole (post inflammatory) (post-traumatic), right eye
H31.012	Macula scars of posterior pole (post inflammatory) (post-traumatic), left eye
H31.013	Macula scars of posterior pole (post inflammatory) (post-traumatic), bilateral
H31.021	Solar retinopathy, right eye
H31.022	Solar retinopathy, left eye
H31.023	Solar retinopathy, bilateral
H31.111	Age-related choroidal atrophy, right eye
H31.112	Age-related choroidal atrophy, left eye
H31.113	Age-related choroidal atrophy, bilateral
H31.121	Diffuse secondary atrophy of choroid, right eye

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ICD-10- CM Code	Description
H31.122	Diffuse secondary atrophy of choroid, left eye
H31.123	Diffuse secondary atrophy of choroid, bilateral
H31.21	Choroideremia
H31.22	Choroidal dystrophy (central areolar) (generalized) (peripapillary)
H31.23	Gyrate atrophy, choroid
H31.311	Expulsive choroidal hemorrhage, right eye
H31.312	Expulsive choroidal hemorrhage, left eye
H31.313	Expulsive choroidal hemorrhage, bilateral
H31.321	Choroidal rupture, right eye
H31.322	Choroidal rupture, left eye
H31.323	Choroidal rupture, bilateral
H31.411	Hemorrhagic choroidal detachment, right eye
H31.412	Hemorrhagic choroidal detachment, left eye
H31.413	Hemorrhagic choroidal detachment, bilateral
H31.421	Serous choroidal detachment, right eye
H31.422	Serous choroidal detachment, left eye
H31.423	Serous choroidal detachment, bilateral
H33.011	Retinal detachment with single break, right eye
H33.012	Retinal detachment with single break, left eye
H33.013	Retinal detachment with single break, bilateral
H33.021	Retinal detachment with multiple breaks, right eye
H33.022	Retinal detachment with multiple breaks, left eye
H33.023	Retinal detachment with multiple breaks, bilateral
H33.031	Retinal detachment with giant retinal tear, right eye
H33.032	Retinal detachment with giant retinal tear, left eye
H33.033	Retinal detachment with giant retinal tear, bilateral
H33.041	Retinal detachment with retinal dialysis, right eye
H33.042	Retinal detachment with retinal dialysis, left eye
H33.043	Retinal detachment with retinal dialysis, bilateral
H33.051	Total retinal detachment, right eye
H33.052	Total retinal detachment, left eye
H33.053	Total retinal detachment, bilateral
H33.111	Cyst of ora serrata, right eye
H33.112	Cyst of ora serrata, left eye
H33.113	Cyst of ora serrata, bilateral
H33.121	Parasitic cyst of retina, right eye
H33.122	Parasitic cyst of retina, left eye

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EXTENDED OPHTHALMOSCOPY



ICD-10- CM Code	Description
H33.123	Parasitic cyst of retina, bilateral
H33.21	Serous retinal detachment, right eye
H33.22	Serous retinal detachment, left eye
H33.23	Serous retinal detachment, bilateral
H33.311	Horseshoe tear of retina without detachment, right eye
H33.312	Horseshoe tear of retina without detachment, left eye
H33.313	Horseshoe tear of retina without detachment, bilateral
H33.321	Round hole, right eye
H33.322	Round hole, left eye
H33.323	Round hole, bilateral
H33.331	Multiple defects of retina without detachment, right eye
H33.332	Multiple defects of retina without detachment, left eye
H33.333	Multiple defects of retina without detachment, bilateral
H33.41	Traction detachment of retina, right eye
H33.42	Traction detachment of retina, left eye
H33.43	Traction detachment of retina, bilateral
H34.01	Transient retinal artery occlusion, right eye
H34.02	Transient retinal artery occlusion, left eye
H34.03	Transient retinal artery occlusion, bilateral
H34.11	Central retinal artery occlusion, right eye
H34.12	Central retinal artery occlusion, left eye
H34.13	Central retinal artery occlusion, bilateral
H34.211	Partial retinal artery occlusion, right eye
H34.212	Partial retinal artery occlusion, left eye
H34.213	Partial retinal artery occlusion, bilateral
H34.231	Retinal artery branch occlusion, right eye
H34.232	Retinal artery branch occlusion, left eye
H34.233	Retinal artery branch occlusion, bilateral
H34.8110	Central retinal vein occlusion, right eye, with macular edema
H34.8111	Central retinal vein occlusion, right eye, with retinal neovascularization
H34.8112	Central retinal vein occlusion, right eye, stable
H34.8120	Central retinal vein occlusion, left eye, with macular edema
H34.8121	Central retinal vein occlusion, left eye with retinal neovascularization
H34.8122	Central retinal vein occlusion, left eye, stable
H34.8130	Central retinal vein occlusion, bilateral, with macular edema
H34.8131	Central retinal vein occlusion, bilateral, with retinal neovascularization
H34.8132	Central retinal vein occlusion, bilateral, stable

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ICD-10- CM Code	Description
H34.821	Venous engorgement, right eye
H34.822	Venous engorgement, left eye
H34.823	Venous engorgement, bilateral
H34.8310	Tributary (branch) retinal vein occlusion, right eye, with macular edema
H34.8311	Tributary (branch) retinal vein occlusion, right eye, with retinal neovascularization
H34.8312	Tributary (branch) retinal vein occlusion, right eye, stable
H34.8320	Tributary (branch) retinal vein occlusion, left eye, with macular edema
H34.8321	Tributary (branch) retinal vein occlusion, left eye, with retinal neovascularization
H34.8322	Tributary (branch) retinal vein occlusion, left eye, stable
H34.8330	Tributary (branch) retinal vein occlusion, bilateral, with macular edema
H34.8331	Tributary (branch) retinal vein occlusion, bilateral, with retinal neovascularization
H34.8332	Tributary (branch) retinal vein occlusion, bilateral, stable
H35.011	Changes in retinal vascular appearance, right eye
H35.012	Changes in retinal vascular appearance, left eye
H35.013	Changes in retinal vascular appearance, bilateral
H35.021	Exudative retinopathy, right eye
H35.022	Exudative retinopathy, left eye
H35.023	Exudative retinopathy, bilateral
H35.031	Hypertensive retinopathy, right eye
H35.032	Hypertensive retinopathy, left eye
H35.033	Hypertensive retinopathy, bilateral
H35.041	Retinal micro-aneurysms, unspecified, right eye
H35.042	Retinal micro-aneurysms, unspecified, left eye
H35.043	Retinal micro-aneurysms, unspecified, bilateral
H35.051	Retinal neovascularization, unspecified, right eye
H35.052	Retinal neovascularization, unspecified, left eye
H35.053	Retinal neovascularization, unspecified, bilateral
H35.061	Retinal vasculitis, right eye
H35.062	Retinal vasculitis, left eye
H35.063	Retinal vasculitis, bilateral
H35.071	Retinal telangiectasis, right eye
H35.072	Retinal telangiectasis, left eye
H35.073	Retinal telangiectasis, bilateral
H35.111	Retinopathy of prematurity, stage 0, right eye
H35.112	Retinopathy of prematurity, stage 0, left eye
H35.113	Retinopathy of prematurity, stage 0, bilateral
H35.121	Retinopathy of prematurity, stage 1, right eye

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ICD-10- CM Code	Description
H35.122	Retinopathy of prematurity, stage 1, left eye
H35.123	Retinopathy of prematurity, stage 1, bilateral
H35.131	Retinopathy of prematurity, stage 2, right eye
H35.132	Retinopathy of prematurity, stage 2, left eye
H35.133	Retinopathy of prematurity, stage 2, bilateral
H35.141	Retinopathy of prematurity, stage 3, right eye
H35.142	Retinopathy of prematurity, stage 3, left eye
H35.143	Retinopathy of prematurity, stage 3, bilateral
H35.151	Retinopathy of prematurity, stage 4, right eye
H35.152	Retinopathy of prematurity, stage 4, left eye
H35.153	Retinopathy of prematurity, stage 4, bilateral
H35.161	Retinopathy of prematurity, stage 5, right eye
H35.162	Retinopathy of prematurity, stage 5, left eye
H35.163	Retinopathy of prematurity, stage 5, bilateral
H35.171	Retrolental fibroplasia, right eye
H35.172	Retrolental fibroplasia, left eye
H35.173	Retrolental fibroplasia, bilateral
H35.21	Other non-diabetic proliferative retinopathy, right eye
H35.22	Other non-diabetic proliferative retinopathy, left eye
H35.23	Other non-diabetic proliferative retinopathy, bilateral
H35.3111	Nonexudative age-related macular degeneration, right eye, early dry stage
H35.3112	Nonexudative age-related macular degeneration, right eye, intermediate dry stage
H35.3113	Nonexudative age-related macular degeneration, right eye, advanced atrophic without subfoveal involvement
H35.3114	Nonexudative age-related macular degeneration, right eye, advanced atrophic with subfoveal involvement
H35.3121	Nonexudative age-related macular degeneration, left eye, early dry stage
H35.3122	Nonexudative age-related macular degeneration, left eye, intermediate dry stage
H35.3123	Nonexudative age-related macular degeneration, left eye, advanced atrophic without subfoveal involvement
H35.3124	Nonexudative age-related macular degeneration, left eye, advanced atrophic with subfoveal involvement
H35.3131	Nonexudative age-related macular degeneration, bilateral, early dry stage
H35.3132	Nonexudative age-related macular degeneration, bilateral, intermediate dry stage
H35.3133	Nonexudative age-related macular degeneration, bilateral, advanced atrophic without subfoveal involvement
H35.3134	Nonexudative age-related macular degeneration, bilateral, advanced atrophic with subfoveal involvement

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ICD-10- CM Code	Description
H35.3211	Exudative age-related macular degeneration, right eye with active choroidal neovascularization
H35.3212	Exudative age-related macular degeneration, right eye, with inactive choroidal neovascularization
H35.3213	Exudative age-related macular degeneration, right eye, with inactive scar
H35.3221	Exudative age-related macular degeneration, left eye with active choroidal neovascularization
H35.3222	Exudative age-related macular degeneration, left eye, with inactive choroidal neovascularization
H35.3223	Exudative age-related macular degeneration, left eye, with inactive scar
H35.3231	Exudative age-related macular degeneration, bilateral, with active choroidal neovascularization
H35.3232	Exudative age-related macular degeneration, bilateral, with inactive choroidal neovascularization
H35.3233	Exudative age-related macular degeneration, bilateral, with inactive scar
H35.33	Angioid streaks of macula
H35.341	Macular cyst, hole, or pseudohole, right eye
H35.342	Macular cyst, hole, or pseudohole, left eye
H35.343	Macular cyst, hole, or pseudohole, bilateral
H35.351	Cystoid macular degeneration, right eye
H35.352	Cystoid macular degeneration, left eye
H35.353	Cystoid macular degeneration, bilateral
H35.361	Drusen (degenerative) of macula, right eye
H35.362	Drusen (degenerative) of macula, left eye
H35.363	Drusen (degenerative) of macula, bilateral
H35.371	Puckering of macula, right eye
H35.372	Puckering of macula, left eye
H35.373	Puckering of macula, bilateral
H35.381	Toxic maculopathy, right eye
H35.382	Toxic maculopathy, left eye
H35.383	Toxic maculopathy, bilateral
H35.411	Lattice degeneration of retina, right eye
H35.412	Lattice degeneration of retina, left eye
H35.413	Lattice degeneration of retina, bilateral
H35.421	Microcystoid degeneration of retina, right eye
H35.422	Microcystoid degeneration of retina, left eye
H35.423	Microcystoid degeneration of retina, bilateral
H35.431	Paving stone degeneration of retina, right eye

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EXTENDED OPHTHALMOSCOPY



ICD-10- CM Code	Description
H35.432	Paving stone degeneration of retina, left eye
H35.433	Paving stone degeneration of retina, bilateral
H35.441	Age-related reticular degeneration of retina, right eye
H35.442	Age-related reticular degeneration of retina, left eye
H35.443	Age-related reticular degeneration of retina, bilateral
H35.451	Secondary pigmentary degeneration, right eye
H35.452	Secondary pigmentary degeneration, left eye
H35.453	Secondary pigmentary degeneration, bilateral
H35.461	Secondary vitreoretinal degeneration, right eye
H35.462	Secondary vitreoretinal degeneration, left eye
H35.463	Secondary vitreoretinal degeneration, bilateral
H35.51	Vitreoretinal dystrophy
H35.52	Pigmentary retinal dystrophy
H35.54	Dystrophies primarily involving the retinal pigment epithelium
H35.61	Retinal hemorrhage, right eye
H35.62	Retinal hemorrhage, left eye
H35.63	Retinal hemorrhage, bilateral
H35.711	Central serous chorioretinopathy, right eye
H35.712	Central serous chorioretinopathy, left eye
H35.713	Central serous chorioretinopathy, bilateral
H35.721	Serous detachment of retinal pigment epithelium, right eye
H35.722	Serous detachment of retinal pigment epithelium, left eye
H35.723	Serous detachment of retinal pigment epithelium, bilateral
H35.731	Hemorrhagic detachment of retinal pigment epithelium, right eye
H35.732	Hemorrhagic detachment of retinal pigment epithelium, left eye
H35.733	Hemorrhagic detachment of retinal pigment epithelium, bilateral
H35.81	Retinal edema
H35.82	Retinal ischemia
H36.811	Nonproliferative sickle-cell retinopathy, right eye
H36.812	Nonproliferative sickle-cell retinopathy, left eye
H36.813	Nonproliferative sickle-cell retinopathy, bilateral
H36.821	Proliferative sickle-cell retinopathy, right eye
H36.822	Proliferative sickle-cell retinopathy, left eye
H36.823	Proliferative sickle-cell retinopathy, bilateral
H40.011	Open angle with borderline findings, low risk, right eye
H40.012	Open angle with borderline findings, low risk, left eye
H40.013	Open angle with borderline findings, low risk, bilateral

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EXTENDED OPHTHALMOSCOPY



ICD-10- CM Code	Description
H40.021	Open angle with borderline findings, high risk, right eye
H40.022	Open angle with borderline findings, high risk, left eye
H40.023	Open angle with borderline findings, high risk, bilateral
H40.031	Anatomical narrow angle, right eye
H40.032	Anatomical narrow angle, left eye
H40.033	Anatomical narrow angle, bilateral
H40.041	Steroid responder, right eye
H40.042	Steroid responder, left eye
H40.043	Steroid responder, bilateral
H40.051	Ocular hypertension, right eye
H40.052	Ocular hypertension, left eye
H40.053	Ocular hypertension, bilateral
H40.061	Primary angle closure without glaucoma damage, right eye
H40.062	Primary angle closure without glaucoma damage, left eye
H40.063	Primary angle closure without glaucoma damage, bilateral
H40.1111	Primary open-angle glaucoma, right eye, mild stage
H40.1112	Primary open angle glaucoma, right eye, moderate stage
H40.1113	Primary open angle glaucoma, right eye, severe stage
H40.1121	Primary open-angle glaucoma, left eye, mild stage
H40.1122	Primary open angle glaucoma, left eye, moderate stage
H40.1123	Primary open angle glaucoma, left eye, severe stage
H40.1131	Primary open-angle glaucoma, bilateral, mild stage
H40.1132	Primary open angle glaucoma, bilateral, moderate stage
H40.1133	Primary open angle glaucoma, bilateral, severe stage
H40.1211	Low-tension glaucoma, right eye, mild stage
H40.1212	Low-tension glaucoma, right eye, moderate stage
H40.1213	Low-tension glaucoma, right eye, severe stage
H40.1221	Low-tension glaucoma, left eye, mild stage
H40.1222	Low-tension glaucoma, left eye, moderate stage
H40.1223	Low-tension glaucoma, left eye, severe stage
H40.1231	Low-tension glaucoma, bilateral, mild stage
H40.1232	Low-tension glaucoma, bilateral, moderate stage
H40.1233	Low-tension glaucoma, bilateral, severe stage
H40.1311	Pigmentary glaucoma, right eye, mild stage
H40.1312	Pigmentary glaucoma, right eye, moderate stage
H40.1313	Pigmentary glaucoma, right eye, severe stage
H40.1321	Pigmentary glaucoma, left eye, mild stage

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ICD-10- CM Code	Description
H40.1322	Pigmentary glaucoma, left eye, moderate stage
H40.1323	Pigmentary glaucoma, left eye, severe stage
H40.1331	Pigmentary glaucoma, bilateral, mild stage
H40.1332	Pigmentary glaucoma, bilateral, moderate stage
H40.1333	Pigmentary glaucoma, bilateral, severe stage
H40.1411	Capsular glaucoma with pseudoexfoliation of lens, right eye, mild stage
H40.1412	Capsular glaucoma with pseudoexfoliation of lens, right eye, moderate stage
H40.1413	Capsular glaucoma with pseudoexfoliation of lens, right eye, severe stage
H40.1421	Capsular glaucoma with pseudoexfoliation of lens, left eye, mild stage
H40.1422	Capsular glaucoma with pseudoexfoliation of lens, left eye, moderate stage
H40.1423	Capsular glaucoma with pseudoexfoliation of lens, left eye, severe stage
H40.1431	Capsular glaucoma with pseudoexfoliation of lens, bilateral, mild stage
H40.1432	Capsular glaucoma with pseudoexfoliation of lens, bilateral, moderate stage
H40.1433	Capsular glaucoma with pseudoexfoliation of lens, bilateral, severe stage
H40.151	Residual stage of open-angle glaucoma, right eye
H40.152	Residual stage of open-angle glaucoma, left eye
H40.153	Residual stage of open-angle glaucoma, bilateral
H40.211	Acute angle-closure glaucoma, right eye
H40.212	Acute angle-closure glaucoma, left eye
H40.213	Acute angle-closure glaucoma, bilateral
H40.2211	Chronic angle-closure glaucoma, right eye, mild stage
H40.2212	Chronic angle-closure glaucoma, right eye, moderate stage
H40.2213	Chronic angle-closure glaucoma, right eye, severe stage
H40.2221	Chronic angle-closure glaucoma, left eye, mild stage
H40.2222	Chronic angle-closure glaucoma, left eye, moderate stage
H40.2223	Chronic angle-closure glaucoma, left eye, severe stage
H40.2231	Chronic angle-closure glaucoma, bilateral, mild stage
H40.2232	Chronic angle-closure glaucoma, bilateral, moderate stage
H40.2233	Chronic angle-closure glaucoma, bilateral, severe stage
H40.231	Intermittent angle-closure glaucoma, right eye
H40.232	Intermittent angle-closure glaucoma, left eye
H40.233	Intermittent angle-closure glaucoma, bilateral
H40.241	Residual stage of angle-closure glaucoma, right eye
H40.242	Residual stage of angle-closure glaucoma, left eye
H40.243	Residual stage of angle-closure glaucoma, bilateral
H40.31X1	Glaucoma secondary to eye trauma, right eye, mild stage
H40.31X2	Glaucoma secondary to eye trauma, right eye, moderate stage

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ICD-10- CM Code	Description
H40.31X3	Glaucoma secondary to eye trauma, right eye, severe stage
H40.32X1	Glaucoma secondary to eye trauma, left eye, mild stage
H40.32X2	Glaucoma secondary to eye trauma, left eye, moderate stage
H40.32X3	Glaucoma secondary to eye trauma, left eye, severe stage
H40.33X1	Glaucoma secondary to eye trauma, bilateral, mild stage
H40.33X2	Glaucoma secondary to eye trauma, bilateral, moderate stage
H40.33X3	Glaucoma secondary to eye trauma, bilateral, severe stage
H40.41X1	Glaucoma secondary to eye inflammation, right eye, mild stage
H40.41X2	Glaucoma secondary to eye inflammation, right eye, moderate stage
H40.41X3	Glaucoma secondary to eye inflammation, right eye, severe stage
H40.42X1	Glaucoma secondary to eye inflammation, left eye, mild stage
H40.42X2	Glaucoma secondary to eye inflammation, left eye, moderate stage
H40.42X3	Glaucoma secondary to eye inflammation, left eye, severe stage
H40.43X1	Glaucoma secondary to eye inflammation, bilateral, mild stage
H40.43X2	Glaucoma secondary to eye inflammation, bilateral, moderate stage
H40.43X3	Glaucoma secondary to eye inflammation, bilateral, severe stage
H40.51X1	Glaucoma secondary to other eye disorders, right eye, mild stage
H40.51X2	Glaucoma secondary to other eye disorders, right eye, moderate stage
H40.51X3	Glaucoma secondary to other eye disorders, right eye, severe stage
H40.52X1	Glaucoma secondary to other eye disorders, left eye, mild stage
H40.52X2	Glaucoma secondary to other eye disorders, left eye, moderate stage
H40.52X3	Glaucoma secondary to other eye disorders, left eye, severe stage
H40.53X1	Glaucoma secondary to other eye disorders, bilateral, mild stage
H40.53X2	Glaucoma secondary to other eye disorders, bilateral, moderate stage
H40.53X3	Glaucoma secondary to other eye disorders, bilateral, severe stage
H40.61X1	Glaucoma secondary to drugs, right eye, mild stage
H40.61X2	Glaucoma secondary to drugs, right eye, moderate stage
H40.61X3	Glaucoma secondary to drugs, right eye, severe stage
H40.62X1	Glaucoma secondary to drugs, left eye, mild stage
H40.62X2	Glaucoma secondary to drugs, left eye, moderate stage
H40.62X3	Glaucoma secondary to drugs, left eye, severe stage
H40.63X1	Glaucoma secondary to drugs, bilateral, mild stage
H40.63X2	Glaucoma secondary to drugs, bilateral, moderate stage
H40.63X3	Glaucoma secondary to drugs, bilateral, severe stage
H40.811	Glaucoma with increased episcleral venous pressure, right eye
H40.812	Glaucoma with increased episcleral venous pressure, left eye
H40.813	Glaucoma with increased episcleral venous pressure, bilateral

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ICD-10- CM Code	Description
H40.821	Hypersecretion glaucoma, right eye
H40.822	Hypersecretion glaucoma, left eye
H40.823	Hypersecretion glaucoma, bilateral
H40.831	Aqueous misdirection, right eye
H40.832	Aqueous misdirection, left eye
H40.833	Aqueous misdirection, bilateral
H43.01	Vitreous prolapse, right eye
H43.02	Vitreous prolapse, left eye
H43.03	Vitreous prolapse, bilateral
H43.11	Vitreous hemorrhage, right eye
H43.12	Vitreous hemorrhage, left eye
H43.13	Vitreous hemorrhage, bilateral
H43.21	Crystalline deposits in vitreous body, right eye
H43.22	Crystalline deposits in vitreous body, left eye
H43.23	Crystalline deposits in vitreous body, bilateral
H43.311	Vitreous membranes and strands, right eye
H43.312	Vitreous membranes and strands, left eye
H43.313	Vitreous membranes and strands, bilateral
H43.811	Vitreous degeneration, right eye
H43.812	Vitreous degeneration, left eye
H43.813	Vitreous degeneration, bilateral
H43.821	Vitreomacular adhesion, right eye
H43.822	Vitreomacular adhesion, left eye
H43.823	Vitreomacular adhesion, bilateral
H44.001	Unspecified purulent endophthalmitis, right eye
H44.002	Unspecified purulent endophthalmitis, left eye
H44.003	Unspecified purulent endophthalmitis, bilateral
H44.011	Panophthalmitis (acute), right eye
H44.012	Panophthalmitis (acute), left eye
H44.013	Panophthalmitis (acute), bilateral
H44.021	Vitreous abscess (chronic), right eye
H44.022	Vitreous abscess (chronic), left eye
H44.023	Vitreous abscess (chronic), bilateral
H44.111	Panuveitis, right eye
H44.112	Panuveitis, left eye
H44.113	Panuveitis, bilateral
H44.121	Parasitic endophthalmitis, unspecified, right eye

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ICD-10- CM Code	Description
H44.122	Parasitic endophthalmitis, unspecified, left eye
H44.123	Parasitic endophthalmitis, unspecified, bilateral
H44.131	Sympathetic uveitis, right eye
H44.132	Sympathetic uveitis, left eye
H44.133	Sympathetic uveitis, bilateral
H44.21	Degenerative myopia, right eye
H44.22	Degenerative myopia, left eye
H44.23	Degenerative myopia, bilateral
H44.2A1	Degenerative myopia with choroidal neovascularization, right eye
H44.2A2	Degenerative myopia with choroidal neovascularization, left eye
H44.2A3	Degenerative myopia with choroidal neovascularization, bilateral
H44.2B1	Degenerative myopia with macular hole, right eye
H44.2B2	Degenerative myopia with macular hole, left eye
H44.2B3	Degenerative myopia with macular hole, bilateral
H44.2C1	Degenerative myopia with retinal detachment, right eye
H44.2C2	Degenerative myopia with retinal detachment, left eye
H44.2C3	Degenerative myopia with retinal detachment, bilateral
H44.2D1	Degenerative myopia with foveoschisis, right eye
H44.2D2	Degenerative myopia with foveoschisis, left eye
H44.2D3	Degenerative myopia with foveoschisis, bilateral
H44.2E1	Degenerative myopia with other maculopathy, right eye
H44.2E2	Degenerative myopia with other maculopathy, left eye
H44.2E3	Degenerative myopia with other maculopathy, bilateral
H44.311	Chalcosis, right eye
H44.312	Chalcosis, left eye
H44.313	Chalcosis, bilateral
H44.321	Siderosis of eye, right eye
H44.322	Siderosis of eye, left eye
H44.323	Siderosis of eye, bilateral
H44.411	Flat anterior chamber hypotony of right eye
H44.412	Flat anterior chamber hypotony of left eye
H44.413	Flat anterior chamber hypotony of eye, bilateral
H44.421	Hypotony of right eye due to ocular fistula
H44.422	Hypotony of left eye due to ocular fistula
H44.423	Hypotony of eye due to ocular fistula, bilateral
H44.431	Hypotony of eye due to other ocular disorders, right eye
H44.432	Hypotony of eye due to other ocular disorders, left eye

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ICD-10- CM Code	Description
H44.433	Hypotony of eye due to other ocular disorders, bilateral
H44.441	Primary hypotony of right eye
H44.442	Primary hypotony of left eye
H44.443	Primary hypotony of eye, bilateral
H44.511	Absolute glaucoma, right eye
H44.512	Absolute glaucoma, left eye
H44.513	Absolute glaucoma, bilateral
H44.521	Atrophy of globe, right eye
H44.522	Atrophy of globe, left eye
H44.523	Atrophy of globe, bilateral
H44.531	Leucocoria, right eye
H44.532	Leucocoria, left eye
H44.533	Leucocoria, bilateral
H44.611	Retained (old) magnetic foreign body in anterior chamber, right eye
H44.612	Retained (old) magnetic foreign body in anterior chamber, left eye
H44.613	Retained (old) magnetic foreign body in anterior chamber, bilateral
H44.621	Retained (old) magnetic foreign body in iris or ciliary body, right eye
H44.622	Retained (old) magnetic foreign body in iris or ciliary body, left eye
H44.623	Retained (old) magnetic foreign body in iris or ciliary body, bilateral
H44.631	Retained (old) magnetic foreign body in lens, right eye
H44.632	Retained (old) magnetic foreign body in lens, left eye
H44.633	Retained (old) magnetic foreign body in lens, bilateral
H44.641	Retained (old) magnetic foreign body in posterior wall of globe, right eye
H44.642	Retained (old) magnetic foreign body in posterior wall of globe, left eye
H44.643	Retained (old) magnetic foreign body in posterior wall of globe, bilateral
H44.651	Retained (old) magnetic foreign body in vitreous body, right eye
H44.652	Retained (old) magnetic foreign body in vitreous body, left eye
H44.653	Retained (old) magnetic foreign body in vitreous body, bilateral
H44.691	Retained (old) intraocular foreign body, magnetic, in other or multiple sites, right eye
H44.692	Retained (old) intraocular foreign body, magnetic, in other or multiple sites, left eye
H44.693	Retained (old) intraocular foreign body, magnetic, in other or multiple sites, bilateral
H44.711	Retained (nonmagnetic) (old) foreign body in anterior chamber, right eye
H44.712	Retained (nonmagnetic) (old) foreign body in anterior chamber, left eye
H44.713	Retained (nonmagnetic) (old) foreign body in anterior chamber, bilateral
H44.721	Retained (nonmagnetic) (old) foreign body in iris or ciliary body, right eye
H44.722	Retained (nonmagnetic) (old) foreign body in iris or ciliary body, left eye
H44.723	Retained (nonmagnetic) (old) foreign body in iris or ciliary body, bilateral

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ICD-10- CM Code	Description
H44.731	Retained (nonmagnetic) (old) foreign body in lens, right eye
H44.732	Retained (nonmagnetic) (old) foreign body in lens, left eye
H44.733	Retained (nonmagnetic) (old) foreign body in lens, bilateral
H44.741	Retained (nonmagnetic) (old) foreign body in posterior wall of globe, right eye
H44.742	Retained (nonmagnetic) (old) foreign body in posterior wall of globe, left eye
H44.743	Retained (nonmagnetic) (old) foreign body in posterior wall of globe, bilateral
H44.751	Retained (nonmagnetic) (old) foreign body in vitreous body, right eye
H44.752	Retained (nonmagnetic) (old) foreign body in vitreous body, left eye
H44.753	Retained (nonmagnetic) (old) foreign body in vitreous body, bilateral
H44.791	Retained (old) intraocular foreign body, nonmagnetic, in other or multiple sites, right eye
H44.792	Retained (old) intraocular foreign body, nonmagnetic, in other or multiple sites, left eye
H44.793	Retained (old) intraocular foreign body, nonmagnetic, in other or multiple sites, bilateral
H44.811	Hemophthalmos, right eye
H44.812	Hemophthalmos, left eye
H44.813	Hemophthalmos, bilateral
H44.821	Luxation of globe, right eye
H44.822	Luxation of globe, left eye
H44.823	Luxation of globe, bilateral
H46.01	Optic papillitis, right eye
H46.02	Optic papillitis, left eye
H46.03	Optic papillitis, bilateral
H46.11	Retrobulbar neuritis, right eye
H46.12	Retrobulbar neuritis, left eye
H46.13	Retrobulbar neuritis, bilateral
H46.2	Nutritional optic neuropathy
H46.3	Toxic optic neuropathy
H47.011	Ischemic optic neuropathy, right eye
H47.012	Ischemic optic neuropathy, left eye
H47.013	Ischemic optic neuropathy, bilateral
H47.021	Hemorrhage in optic nerve sheath, right eye
H47.022	Hemorrhage in optic nerve sheath, left eye
H47.023	Hemorrhage in optic nerve sheath, bilateral
H47.031	Optic nerve hypoplasia, right eye
H47.032	Optic nerve hypoplasia, left eye

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ICD-10- CM Code	Description
H47.033	Optic nerve hypoplasia, bilateral
H47.11	Papilledema associated with increased intracranial pressure
H47.12	Papilledema associated with decreased ocular pressure
H47.13	Papilledema associated with retinal disorder
H47.141	Foster-Kennedy syndrome, right eye
H47.142	Foster-Kennedy syndrome, left eye
H47.143	Foster-Kennedy syndrome, bilateral
H47.211	Primary optic atrophy, right eye
H47.212	Primary optic atrophy, left eye
H47.213	Primary optic atrophy, bilateral
H47.22	Hereditary optic atrophy
H47.231	Glaucomatous optic atrophy, right eye
H47.232	Glaucomatous optic atrophy, left eye
H47.233	Glaucomatous optic atrophy, bilateral
H47.311	Coloboma of optic disc, right eye
H47.312	Coloboma of optic disc, left eye
H47.313	Coloboma of optic disc, bilateral
H47.321	Drusen of optic disc, right eye
H47.322	Drusen of optic disc, left eye
H47.323	Drusen of optic disc, bilateral
H47.331	Pseudopapilledema of optic disc, right eye
H47.332	Pseudopapilledema of optic disc, left eye
H47.333	Pseudopapilledema of optic disc, bilateral
H47.41	Disorders of optic chiasm in (due to) inflammatory disorders
H47.42	Disorders of optic chiasm in (due to) neoplasm
H47.43	Disorders of optic chiasm in (due to) vascular disorders
H47.49	Disorders of optic chiasm in (due to) other disorders
H53.121	Transient visual loss, right eye
H53.122	Transient visual loss, left eye
H53.123	Transient visual loss, bilateral
H53.131	Sudden visual loss, right eye
H53.132	Sudden visual loss, left eye
H53.133	Sudden visual loss, bilateral
H59.021	Cataract (lens) fragments in eye following cataract surgery, right eye
H59.022	Cataract (lens) fragments in eye following cataract surgery, left eye
H59.023	Cataract (lens) fragments in eye following cataract surgery, bilateral
H59.031	Cystoid macular edema following cataract surgery, right eye

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ICD-10- CM Code	Description
H59.032	Cystoid macular edema following cataract surgery, left eye
H59.033	Cystoid macular edema following cataract surgery, bilateral
P07.01	Extremely low birth weight newborn, less than 500 grams
P07.02	Extremely low birth weight newborn, 500-749 grams
P07.03	Extremely low birth weight newborn, 750-999 grams
P07.14	Other low birth weight newborn, 1000-1249 grams
P07.15	Other low birth weight newborn, 1250-1499 grams
P07.16	Other low birth weight newborn, 1500-1749 grams
P07.17	Other low birth weight newborn, 1750-1999 grams
P07.18	Other low birth weight newborn, 2000-2499 grams
P07.21	Extreme immaturity of newborn, gestational age less than 23 completed weeks
P07.22	Extreme immaturity of newborn, gestational age 23 completed weeks
P07.23	Extreme immaturity of newborn, gestational age 24 completed weeks
P07.24	Extreme immaturity of newborn, gestational age 25 completed weeks
P07.25	Extreme immaturity of newborn, gestational age 26 completed weeks
P07.26	Extreme immaturity of newborn, gestational age 27 completed weeks
P07.31	Preterm newborn, gestational age 28 completed weeks
P07.32	Preterm newborn, gestational age 29 completed weeks
P07.33	Preterm newborn, gestational age 30 completed weeks
P07.34	Preterm newborn, gestational age 31 completed weeks
P07.35	Preterm newborn, gestational age 32 completed weeks
P07.36	Preterm newborn, gestational age 33 completed weeks
P07.37	Preterm newborn, gestational age 34 completed weeks
P07.38	Preterm newborn, gestational age 35 completed weeks
P07.39	Preterm newborn, gestational age 36 completed weeks
Q14.0	Congenital malformation of vitreous humor
Q14.1	Congenital malformation of retina
Q14.2	Congenital malformation of optic disc
Q14.3	Congenital malformation of choroid
Q14.8	Other congenital malformations of posterior segment of eye
Q14.9	Congenital malformation of posterior segment of eye, unspecified
Q15.0	Congenital glaucoma
Q85.01	Neurofibromatosis, type 1
Q85.02	Neurofibromatosis, type 2
Q85.03	Schwannomatosis
Q85.1	Tuberous sclerosis
Q85.8	Other phakomatoses, not elsewhere classified

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ICD-10- CM Code	Description
Q85.9	Phakomatosis, unspecified
Q87.42	Marfan's syndrome with ocular manifestations
S05.11XA	Contusion of eyeball and orbital tissues right eye initial encounter
S05.11XD	Contusion of eyeball and orbital tissues right eye subsequent encounter
S05.11XS	Contusion of eyeball and orbital tissues right eye sequela
S05.12XA	Contusion of eyeball and orbital tissues left eye initial encounter
S05.12XD	Contusion of eyeball and orbital tissues left eye subsequent encounter
S05.12XS	Contusion of eyeball and orbital tissues left eye sequela
S05.21XA	Ocular laceration and rupture with prolapse or loss of intraocular tissue, right eye, initial encounter
S05.21XD	Ocular laceration and rupture with prolapse or loss of intraocular tissue, right eye, subsequent encounter
S05.21XS	Ocular laceration and rupture with prolapse or loss of intraocular tissue, right eye, sequela
S05.22XA	Ocular laceration and rupture with prolapse or loss of intraocular tissue, left eye, initial encounter
S05.22XD	Ocular laceration and rupture with prolapse or loss of intraocular tissue, left eye, subsequent encounter
S05.22XS	Ocular laceration and rupture with prolapse or loss of intraocular tissue, left eye, sequela
S05.31XA	Ocular laceration without prolapse or loss of intraocular tissue, right eye, initial encounter
S05.31XD	Ocular laceration without prolapse or loss of intraocular tissue, right eye, subsequent encounter
S05.31XS	Ocular laceration without prolapse or loss of intraocular tissue, right eye, sequela
S05.32XA	Ocular laceration without prolapse or loss of intraocular tissue, left eye, initial encounter
S05.32XD	Ocular laceration without prolapse or loss of intraocular tissue, left eye, subsequent encounter
S05.32XS	Ocular laceration without prolapse or loss of intraocular tissue, left eye, sequela
S05.41XA	Penetrating wound of orbit with or without foreign body, right eye, initial encounter
S05.41XD	Penetrating wound of orbit with or without foreign body, right eye, subsequent encounter
S05.41XS	Penetrating wound of orbit with or without foreign body, right eye, sequela
S05.42XA	Penetrating wound of orbit with or without foreign body, left eye, initial encounter
S05.42XD	Penetrating wound of orbit with or without foreign body, left eye, subsequent encounter
S05.42XS	Penetrating wound of orbit with or without foreign body, left eye, sequela

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ICD-10- CM Code	Description
S05.51XA	Penetrating wound with foreign body of right eyeball, initial encounter
S05.51XD	Penetrating wound with foreign body of right eyeball, subsequent encounter
S05.51XS	Penetrating wound with foreign body of right eyeball, sequela
S05.52XA	Penetrating wound with foreign body of left eyeball, initial encounter
S05.52XD	Penetrating wound with foreign body of left eyeball, subsequent encounter
S05.52XS	Penetrating wound with foreign body of left eyeball, sequela
S05.61XA	Penetrating wound without foreign body or right eyeball, initial encounter
S05.61XD	Penetrating wound without foreign body or right eyeball, subsequent encounter
S05.61XS	Penetrating wound without foreign body or right eyeball, sequela
S05.62XA	Penetrating wound without foreign body or left eyeball, initial encounter
S05.62XD	Penetrating wound without foreign body or left eyeball, subsequent encounter
S05.62XS	Penetrating wound without foreign body or left eyeball, sequela
T74.4XXA	Shaken infant syndrome, initial encounter
T74.4XXD	Shaken infant syndrome, subsequent encounter
T74.4XXS	Shaken infant syndrome, sequela
T85.22XA	Displacement of intraocular lens, initial encounter
T85.22XD	Displacement of intraocular lens, subsequent encounter
T85.22XS	Displacement of intraocular lens, sequela

Reviews, Revisions, and Approvals	Reviewed Date	Approval Date
Original Approval date.	03/21	05/21
Reviewed CPT and ICD-10-CM codes.	09/21	11/21
Annual Review; Updated medical indications to include iridocyclitis related diagnoses, DM w/macular edema, Retinal neovascularization, proliferative retinopathy, Glaucomatous optic atrophy, Neurofibromatosis, Schwannomatosis; premature birth, penetrating orbital wounds and shaken infant syndrome; deleted medical indications for Avulsion;	09/22	09/22
NCHC verbiage removed from NC Guidance Verbiage.	04/23	04/23
Annual review. ICD-10-CM, CPT codes and References reviewed. Hyphema ICD-10 codes updated with no effect on criteria. ICD-10 H31.101-H31.103 Choroidal Degeneration codes deleted.	08/23	08/23
Annual Review. Added ICD-10 codes H36.811-13 and H36.821-23 for sickle-cell retinopathy. HCPCS table removed. References updated.	08/24	08/24

References

1. Guyer DR, Yannuzzi LA, Chang, S, Shields JA, Green WR. Retina vitreous macula, clinical examination of the posterior segment of the eye. W.B. Saunders Company; 1999:21-28.
2. Jones WL, Reidy RW. Atlas of the peripheral ocular fundus. Butterworth Publishers; 1985:1-4.
3. American Academy of Ophthalmology Retina Panel. Preferred Practice Pattern® Guidelines. Age-Related Macular Degeneration. San Francisco, CA: American Academy of Ophthalmology; 2019, <https://www.aao.org/preferred-practice-pattern/age-related-macular-degeneration-ppp>
4. American Academy of Ophthalmology Retina Panel. Preferred Practice Pattern® Guidelines. Diabetic Retinopathy PPP 2019. San Francisco, CA: American Academy of Ophthalmology; 2019, <https://www.aao.org/preferred-practice-pattern/diabetic-retinopathy-ppp>

North Carolina Guidance

Eligibility Requirements

- a. An eligible beneficiary shall be enrolled in the NC Medicaid Program (Medicaid is NC Medicaid program, unless context clearly indicates otherwise);
- b. Provider(s) shall verify each Medicaid beneficiary's eligibility each time a service is rendered.
- c. The Medicaid beneficiary may have service restrictions due to their eligibility category that would make them ineligible for this service.

EPSDT Special Provision: Exception to Policy Limitations for a Medicaid Beneficiary under 21 Years of Age

- a. 42 U.S.C. § 1396d(r) [1905(r) of the Social Security Act]
Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) is a federal Medicaid requirement that requires the state Medicaid agency to cover services, products, or procedures for Medicaid beneficiary under 21 years of age if the service is medically necessary health care to correct or ameliorate a defect, physical or mental illness, or a condition [health problem] identified through a screening examination (includes any evaluation by a physician or other licensed practitioner).

This means EPSDT covers most of the medical or remedial care a child needs to improve or maintain his or her health in the best condition possible, compensate for a health problem, prevent it from worsening, or prevent the development of additional health problems.

Medically necessary services will be provided in the most economic mode, as long as the treatment made available is similarly efficacious to the service requested by the beneficiary's physician, therapist, or other licensed practitioner; the determination process does not delay the delivery of the needed service; and the determination does not limit the beneficiary's right to a free choice of providers.

EPSDT does not require the state Medicaid agency to provide any service, product or procedure:

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1. that is unsafe, ineffective, or experimental or investigational.
2. that is not medical in nature or not generally recognized as an accepted method of medical practice or treatment.

Service limitations on scope, amount, duration, frequency, location of service, and other specific criteria described in clinical coverage policies may be exceeded or may not apply as long as the provider's documentation shows that the requested service is medically necessary "to correct or ameliorate a defect, physical or mental illness, or a condition" [health problem]; that is, provider documentation shows how the service, product, or procedure meets all EPSDT criteria, including to correct or improve or maintain the beneficiary's health in the best condition possible, compensate for a health problem, prevent it from worsening, or prevent the development of additional health problems.

EPSDT and Prior Approval Requirements

1. If the service, product, or procedure requires prior approval, the fact that the beneficiary is under 21 years of age does NOT eliminate the requirement for prior approval.
2. **IMPORTANT ADDITIONAL INFORMATION** about EPSDT and prior approval is found in the *NCTracks Provider Claims and Billing Assistance Guide*, and on the EPSDT provider page. The Web addresses are specified below:

NCTracks Provider Claims and Billing Assistance Guide:

<https://www.nctracks.nc.gov/content/public/providers/provider-manuals.html>

EPSDT provider page: <https://medicaid.ncdhhs.gov/>

Provider(s) Eligible to Bill for the Procedure, Product, or Service

To be eligible to bill for the procedure, product, or service related to this policy, the provider(s) shall:

- a. meet Medicaid qualifications for participation;
- b. have a current and signed Department of Health and Human Services (DHHS) Provider Administrative Participation Agreement; and
- c. bill only for procedures, products, and services that are within the scope of their clinical practice, as defined by the appropriate licensing entity.

Compliance

Provider(s) shall comply with the following in effect at the time the service is rendered:

- a. All applicable agreements, federal, state and local laws and regulations including the Health Insurance Portability and Accountability Act (HIPAA) and record retention requirements; and
- b. All NC Medicaid's clinical (medical) coverage policies, guidelines, policies, provider manuals, implementation updates, and bulletins published by the Centers for Medicare and Medicaid Services (CMS), DHHS, DHHS division(s) or fiscal contractor(s).

Claims-Related Information

Provider(s) shall comply with the NC Tracks Provider Claims and Billing Assistance Guide, Medicaid bulletins, fee schedules, NC Medicaid's clinical coverage policies and any other relevant documents for specific coverage and reimbursement for Medicaid:

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- a. Claim Type - as applicable to the service provided:
Professional (CMS-1500/837P transaction)
Institutional (UB-04/837I transaction)
Unless directed otherwise, Institutional Claims must be billed according to the National Uniform Billing Guidelines. All claims must comply with National Coding Guidelines.
- b. International Classification of Diseases and Related Health Problems, Tenth Revisions, Clinical Modification (ICD-10-CM) and Procedural Coding System (PCS) - Provider(s) shall report the ICD-10-CM and Procedural Coding System (PCS) to the highest level of specificity that supports medical necessity. Provider(s) shall use the current ICD-10 edition and any subsequent editions in effect at the time of service. Provider(s) shall refer to the applicable edition for code description, as it is no longer documented in the policy.
- c. Code(s) - Provider(s) shall report the most specific billing code that accurately and completely describes the procedure, product or service provided. Provider(s) shall use the Current Procedural Terminology (CPT), Health Care Procedure Coding System (HCPCS), and UB-04 Data Specifications Manual (for a complete listing of valid revenue codes) and any subsequent editions in effect at the time of service. Provider(s) shall refer to the applicable edition for the code description, as it is no longer documented in the policy. If no such specific CPT or HCPCS code exists, then the provider(s) shall report the procedure, product or service using the appropriate unlisted procedure or service code.
Unlisted Procedure or Service
CPT: The provider(s) shall refer to and comply with the Instructions for Use of the CPT Codebook, Unlisted Procedure or Service, and Special Report as documented in the current CPT in effect at the time of service.
HCPCS: The provider(s) shall refer to and comply with the Instructions For Use of HCPCS National Level II codes, Unlisted Procedure or Service and Special Report as documented in the current HCPCS edition in effect at the time of service
- d. Modifiers - Providers shall follow applicable modifier guidelines.
- e. Billing Units - Provider(s) shall report the appropriate code(s) used which determines the billing unit(s).
- f. Co-payments -
For Medicaid refer to Medicaid State Plan:
<https://medicaid.ncdhhs.gov/get-involved/nc-health-choice-state-plan>
- g. Reimbursement - Provider(s) shall bill their usual and customary charges. For a schedule of rates, refer to: <https://medicaid.ncdhhs.gov/>.

Important Reminder

This clinical policy has been developed by appropriately experienced and licensed health care professionals based on a review and consideration of currently available generally accepted standards of medical practice; peer-reviewed medical literature; government agency/program approval status; evidence-based guidelines and positions of leading national health professional organizations; views of physicians practicing in relevant clinical areas affected by this clinical policy; and other available clinical information. The Health Plan makes no representations and

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accepts no liability with respect to the content of any external information used or relied upon in developing this clinical policy. This clinical policy is consistent with standards of medical practice current at the time that this clinical policy was approved. “Health Plan” means a health plan that has adopted this clinical policy and that is operated or administered, in whole or in part, by Centene Management Company, LLC, or any of such health plan’s affiliates, as applicable.

The purpose of this clinical policy is to provide a guide to medical necessity, which is a component of the guidelines used to assist in making coverage decisions and administering benefits. It does not constitute a contract or guarantee regarding payment or results. Coverage decisions and the administration of benefits are subject to all terms, conditions, exclusions and limitations of the coverage documents (e.g., evidence of coverage, certificate of coverage, policy, contract of insurance, etc.), as well as to state and federal requirements and applicable Health Plan-level administrative policies and procedures.

This clinical policy is effective as of the date determined by the Health Plan. The date of posting may not be the effective date of this clinical policy. This clinical policy may be subject to applicable legal and regulatory requirements relating to provider notification. If there is a discrepancy between the effective date of this clinical policy and any applicable legal or regulatory requirement, the requirements of law and regulation shall govern. The Health Plan retains the right to change, amend or withdraw this clinical policy, and additional clinical policies may be developed and adopted as needed, at any time.

This clinical policy does not constitute medical advice, medical treatment or medical care. It is not intended to dictate to providers how to practice medicine. Providers are expected to exercise professional medical judgment in providing the most appropriate care, and are solely responsible for the medical advice and treatment of members/enrollees. This clinical policy is not intended to recommend treatment for members/enrollees. Members/enrollees should consult with their treating physician in connection with diagnosis and treatment decisions.

Providers referred to in this clinical policy are independent contractors who exercise independent judgment and over whom the Health Plan has no control or right of control. Providers are not agents or employees of the Health Plan.

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