

## 2020 MAJOR CODING UPDATE FOR EXTENDED OPHTHALMOSCOPY

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There are two new codes for extended ophthalmoscopy effective January 1, 2020 that are radically different from the prior ones in that the code selection is based on anatomic areas of the eye and disease entity.

The new 2020 **CPT codes** are:

**92201** Ophthalmoscopy, extended, with retinal drawing and scleral depression of peripheral retinal disease (eg, for retinal tear, retinal detachment, retinal tumor) with interpretation and report, unilateral or bilateral

**92202** Ophthalmoscopy, extended, with drawing of optic nerve or macula (eg, for glaucoma, macular pathology, tumor) with interpretation and report, unilateral or bilateral

► **Do not report 92201, 92202 in conjunction with 92250** ◀

### **TIPS:**

- The codes are **unilateral/bilateral** signifying payment is the same whether one or both eyes are tested.
- There is **no longer differentiation** between Initial and Subsequent.
- **Retinal drawing**, as well as an **Interpretation and Report**, is required for **each** eye. Be sure to follow the instructions in "The Three C's: Interpretation and Report Requirements for Ophthalmic Diagnostic Testing" that can be found under Diagnostic Tests on my website (RivaLeeAsbell.com).
- Be sure to check with your Medicare MAC for new LCDs or revisions of the current ones.
- **Retinal drawing**, as well as an **Interpretation and Report**, is required for **each** eye. The drawing is not a computerized sketch taken from the EMR and cut & pasted. Be sure to check with your Medicare MAC for new LCDs or revisions of the current ones.

- If the optic nerve, macula, and peripheral retina using scleral depression is performed together on the **same** day **only one service** can be billed. **They cannot be unbundled.**
- The NCCI bundles for **CPT codes 92201 and 92202** can **neither be unbundled with each other nor with 92250.**