

**EFFECTIVE DATE:** 02|09|2009

**POLICY LAST UPDATED:** 12|15|2015

## **OVERVIEW**

Extended ophthalmoscopy is a detailed examination of the retina and includes a true drawing of the retina, with interpretation and report. Fundus photography involves the use of a retinal camera to document abnormalities of the retina and disease processes affecting the eye, in order to follow the progress of such disease.

## **MEDICAL CRITERIA**

Not applicable

## **PRIOR AUTHORIZATION**

Prior authorization is not required.

## **POLICY STATEMENT**

### **BlueCHiP for Medicare and Commercial Products**

Extended ophthalmoscopy and fundus photography are considered medically necessary.

## **COVERAGE**

Benefits may vary between groups and contracts. Please refer to the appropriate Benefit Booklet, Evidence of Coverage, or Subscriber Agreement for the applicable diagnostic test benefits/coverage.

## **BACKGROUND**

An ophthalmoscope is a handheld instrument with a magnifying lens and an illumination system that enables a doctor to examine the inside of a person's eye. Ophthalmoscopy is useful for viewing the vitreous humor, retina, optic nerve, retinal veins and arteries, and associated structures. A routine ophthalmoscopy is part of general and special ophthalmologic services whenever indicated, and is not reported separately.

### **Extended Ophthalmoscopy**

An extended ophthalmoscopy is a meticulous evaluation of the eye with detailed documentation of a severe ophthalmologic problem when photography is not adequate or appropriate. Extended ophthalmoscopy is used for evaluation of tumors of the retina and choroid, retinal tears, detachments, hemorrhages, exudative detachments, and retinal defects without detachment, as well as other ocular defects. The physician is required to create detailed drawings that reveal the extent of the examination and findings, along with an interpretation and report.

Extended ophthalmoscopy is most frequently performed utilizing an indirect lens, although it may be performed using contact lens biomicroscopy. It may require scleral depression and is usually performed with the pupil dilated. It is performed by the physician when a more detailed examination (including that of the periphery) is needed, following routine ophthalmoscopy. Extended ophthalmoscopy is indicated when the level of examination requires a complete view of the posterior segment of the eye and documentation is greater than that required for general ophthalmoscopy.

## **Fundus Photography**

Fundus photography (also called fundography) is the creation of a photograph of the interior surface of the eye, including the retina, optic disc, macula, and posterior pole (i.e., the fundus). Fundus photography is used by optometrists, ophthalmologists, and trained medical professionals for monitoring progression of a disease, diagnosis of a disease (combined with retinal angiography), or in screening programs and epidemiology.

Compared to ophthalmoscopy, fundus photography generally needs a considerably larger instrument, but has the advantage of availing the image to be examined by a specialist at another location and/or time, as well as providing photo documentation for future reference. Modern fundus photographs generally recreate considerably larger areas of the fundus than what can be seen at any one time with handheld ophthalmoscopes. Fundus photography is typically used as a method of documentation and also in determining the progression and treatment.

Fundus photography may be indicated to document abnormalities of disease process affecting the eye, or to follow the progress of such disease. Photographs and an interpretation and report may be necessary to document a disease process, to follow the progress of a disease, or to plan treatment for a disease process.

Extended ophthalmoscopy and fundus photography are medically necessary for the indications noted in the coding section. All other indications are not medically necessary as there is insufficient evidence in published peer-reviewed medical literature to support the use of this treatment.

## **CODING**

### **BlueCHiP for Medicare and Commercial Products**

The following CPT codes are covered:

92225

92226

92250

## **RELATED POLICIES**

Not applicable

## **PUBLISHED**

Provider Update, February 2016

Provider Update, September 2014

Provider Update, December 2013

Provider Update, August 2012

Provider Update, August 2011

Provider Update, September 2010

Provider Update, August 2009

## **REFERENCES**

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4. National Guideline Clearinghouse. Age-related macular degeneration. Limited revision. [www.guideline.gov](http://www.guideline.gov). Accessed July 21, 2006.
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