

network

RAPID UPDATE



March 15, 2012

Clarification of Vision Benefits under Health Care Reform

Health Care Reform (HCR) preventive screenings are eye screenings, such as an eye chart exam or visual exam of the eye, typically done in the physician office as part of a preventive service. The details and CPT codes for HCR preventive vision screenings are listed below:

- 99173 Screening test of visual acuity, quantitative, bilateral and
- 99174 Ocular photo screening with interpretation and report, bilateral.

Anthem Blue Cross and Blue Shield in Ohio continues to cover additional services under the medical benefit related to vision. These services would be covered based on place of service and include HCPCS codes and those listed below:

- 92015 Determination of refraction
- 99172 Visual functional screening quantitative determination of visual acuity
- S0620 Routine ophthalmological examination including refraction; new patient
- S0621 Routine ophthalmological examination including refraction; established patient

Some diagnoses, such as nearsighted, farsighted and astigmatism, are no longer considered preventive and are not covered if billed as preventive. However, other medical conditions, such as eye injury and glaucoma, will be covered and paid based on place of service. Diabetic eye exams are covered in full, limited to one per year. This information applies to the following services and CPT codes:

- 92002 Ophthalmological services: medical examination and evaluation, intermediate, new patient
- 92004 Ophthalmological services: medical examination and evaluation, comprehensive, new patient
- 92012 Ophthalmological services: medical examination and evaluation, intermediate, established patient
- 92014 Ophthalmological services: medical examination and evaluation, comprehensive, established patient
- 92018 Ophthalmological services: medical examination and evaluation under general anesthesia
- 92019 Ophthalmological services: medical examination and evaluation under general anesthesia, limited

We apologize for any inconvenience caused by the lack of clarification about the above services.

If you have questions, please contact your local Network Relations consultant.

Note: CPT codes change periodically due to clinical and medical policy updates. This is a "snapshot" of what is covered as of March 15, 2012. Coverage for services is subject to the terms and conditions of the member's health benefit plan. Anthem's reimbursement, if any, is reduced by any applicable deductibles, co-payments and/or coinsurance as defined in the member's health benefit plan.

Anthem Blue Cross and Blue Shield is the trade name of: In Indiana: Anthem Insurance Companies, Inc. In Kentucky: Anthem Health Plans of Kentucky, Inc. In Missouri (excluding 30 counties in the Kansas City area): RightCHOICE® Managed Care, Inc. (RIT), Healthy Alliance® Life Insurance Company (HALIC), and HMO Missouri, Inc. RIT and certain affiliates administer non-HMO benefits underwritten by HALIC and HMO benefits underwritten by HMO Missouri, Inc. RIT and certain affiliates only provide administrative services for self-funded plans and do not underwrite benefits. In Ohio: Community Insurance Company. In Wisconsin: Blue Cross Blue Shield of Wisconsin ("BCBSWi"), which underwrites or administers the PPO and indemnity policies; CompCare Health Services Insurance Corporation ("CompCare"), which underwrites or administers the HMO policies; and CompCare and BCBSWi collectively, which underwrite or administer the POS policies. Independent licensees of the Blue Cross and Blue Shield Association. ® ANTHEM is a registered trademark of Anthem Insurance Companies, Inc. The Blue Cross and Blue Shield names and symbols are the registered marks of the Blue Cross and Blue Shield Association.

Visit us online at www.anthem.com