Chapter 7 Section 6.1

Ophthalmological Services

Issue Date: November 3, 1992
Authority: 32 CFR 199.4(c)(2)(xvi), (e)(6), (g)(46), (g)(50), and 10 USC 1079(a)(3)

1.0 CPT[1] PROCEDURE CODE RANGES

92002 - 92060, 92070 - 92335, 92390 - 92499

2.0 DESCRIPTION

Ophthalmological services may include an examination and other specialized services. The purpose of an examination is to diagnose or treat a medical condition of the eye, eyelid, lacrimal system, or orbit. A "routine eye examination" is an evaluation of the eyes, including but not limited to refractive services, that is not related to a medical or surgical condition or to the medical or surgical treatment of a covered illness or injury.

3.0 POLICY

3.1 For all beneficiaries, opthalmological services (including refractive services) provided in connection with the medical or surgical treatment of a covered illness or injury are covered.

3.2 For Active Duty Family Members (ADFMs) payment can be made for one routine eye examination per year.

3.2.1 Routine eye examinations as defined in 32 CFR 199.2 includes coverage of those services rendered in order to determine the refractive state of the eyes. The CPT[1] procedure codes for payment of routine eye examinations are as follows:

92002 - EYE EXAM, NEW PATIENT
92004 - EYE EXAM, NEW PATIENT
92012 - EYE EXAM, ESTABLISHED PATIENT
92014 - EYE EXAM & TREATMENT
92015 - REFRACTION
99172 - OCULAR FUNCTION SCREEN
99173 - VISUAL ACUITY SCREEN

3.2.2 TRICARE Prime and Standard ADFMs are entitled to one annual routine eye. Prime ADFMs may receive their annual routine eye examination from any network provider without referral, authorization, or preauthorization from the Primary Care Manager (PCM), or any other authority; i.e., a Prime ADFM will be allowed to set up his or her own appointment for a routine eye

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examination with any network optometrist or ophthalmologist. Standard ADFMs may self-refer to any TRICARE authorized provider regardless of whether or not they are a network provider; i.e., a Standard ADFM may set up his or her own appointment with either a network or non-network, TRICARE authorized, optometrist or ophthalmologist.

3.3 For Prime enrollees, see Section 2.2 for additional information on routine eye examinations.

3.4 Heidelberg Retina Tomograph (HRT), Optical Coherence Tomograph (OCT), and Scanning laser polarimetry (GDx) (CPT[2] procedure code 92135) to diagnose and monitor progression of suspected glaucoma may be considered for cost-sharing. Effective October 28, 2008.

4.0 EXCLUSIONS

4.1 Routine eye examinations are NOT covered for Standard retirees or their dependents that are not enrolled in Prime except for eye exams allowed under the well-child benefit in Section 2.5.

4.2 Orthoptics, also known as vision training, vision therapy, eye exercises, eye therapy, is excluded by 32 CFR 199.4(g)(46) (CPT[2] procedure code 92065).

4.3 Canaloplasty in the treatment of glaucoma is unproven.

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