

Medical Coverage Policy | Visual Acuity Screening for Children Aged 0-5 Years



EFFECTIVE DATE: 01/01/2014
POLICY LAST UPDATED: 04/15/2014

OVERVIEW

Visual Acuity refers to the sharpness or clarity of vision, measured as the ability to distinguish letters or other images of various sizes at a fixed distance, usually with a Snellen chart.

NOTE: This policy applies to members who do NOT have preventive services as provided under Health Care Reform. See the Preventive Services for Commercial policy for those members who have preventive services under Health Care Reform.

PRIOR AUTHORIZATION

None

POLICY STATEMENT

Commercial Products:

Visual acuity testing (99173) is a covered, separately reimbursable service when performed in conjunction with a preventive medicine service code (99382, 99383, 99392, or 99393) for patients aged 3-5 years.

Visual acuity screening is considered integral to an evaluation and management service or a preventive medicine examination in age groups other than 3 to 5 years and is not separately reimbursable for patients other than those described above.

Visual acuity testing (99173) should not be reported in conjunction with visual function screening (99172).

Instrument-based ocular screening (e.g. photoscreening, automated-refraction), bilateral (99174) is a covered, separately reimbursable service. 99174 is covered for twice per year for children ages 0-1 and once per year for children 1-5. Instrument-based ocular screening (99174) cannot be filed on the same day as Visual acuity testing (99173).

BC for Medicare

Not applicable

MEDICAL CRITERIA

None

BACKGROUND

Visual acuity refers to the clarity or clearness of the vision, a measure of how well a person sees. Visual acuity testing is used to determine how well a person can see at various distances using a Snellen's chart. The Snellen's chart is the familiar eye test with block letters that decrease in size corresponding to the distance at which the line of letters is normally visible.

Visual acuity testing is normally performed as part of a pediatric preventive (well-child) visit. When acuity is measured as part of a general ophthalmological service or an evaluation/management service of the eye, it is a diagnostic examination and not a screening test, and should be reported using the appropriate

ophthalmological service code (92002, 92004, 92012, 92014, 92081, 92082, or 92083) or evaluation and management codes (99201 to 99215).

Ocular photoscreening is based on the principle of photorefractive in which the refractive state of the eye is assessed via the pattern of light reflected through the pupil. The images can then be analyzed based on the position of the corneal light reflex, as well as the overall reflection of light from the fundus, which provides information on the child's fixation pattern and the presence or absence of strabismus. Patients are photographed in a darkened room while looking at the camera. The photographs can be sent to a central laboratory for analysis, either by ophthalmologists or specifically trained personnel. Results are typically graded as pass, fail, or repeat photoscreening.

COVERAGE

Commercial Products:

Benefits may vary between groups/contracts. Please refer to the appropriate Evidence of Coverage or Subscriber Agreement for applicable medical benefits/coverage

CODING

Commercial:

The following codes are covered:

99173 99174

RELATED POLICIES

None

PUBLISHED

Provider Update June 2014

Provider Update March 2008

Provider Update Sept 2004

REFERENCES

Not applicable

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