



March Vision Care External Ocular Photography

Subject: External Ocular Photography

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Overview

External ocular photography documents the external eye, lids and ocular adnexa. Photographs can record the eye and its motion more accurately than physician chart notes or drawings. This policy describes the medical necessity requirements for external ocular photography.

Clinical Criteria

March Vision has determined that external ocular photography is medically necessary for the following conditions:

- Keratitis, corneal degeneration, dystrophy, injury, edema, ulceration, opacification, ectasia or perforation;
- Iridocyclitis and associated glaucoma;
- Anterior chamber inflammation, hyphema, narrow angle, or synechiae;
- Conjunctivitis, episcleritis, scleritis;
- Eyelid pathology, including blepharitis, dermatitis, entropion, ectropion, ptosis, retraction, xanthelasma, chloasma, madarosis, edema and vascular abnormalities;
- External ocular and eyelid pathology including neoplasms, melanomas, carcinomas, cysts, trauma and burns.

CPT Coding

The following list of codes are for informational purposes only and may not be all-inclusive. Deleted codes and codes which are not effective at the time the service is rendered may not be eligible for reimbursement.

92285

External ocular photography with interpretation and report for documentation of medical progress (e.g., close-up photography, slit lamp photography, goniophotography, stereophotography)

Quantity Limits

External ocular photography is payable a maximum of 2 times per benefit year.