

# Medicare 2011 National Unadjusted Base Rates

Non-Facility Rates Published December 28, 2010



CPT Code	Description	Unilateral/ Bilateral <sup>(1)</sup>	Coding Restrictions <sup>(2)</sup>	Unadjusted Base Rate
<b>Imaging</b>				
92132	SCODI (OCT/HRT), Anterior segment	Unilateral OR Bilateral	92133* 92134*	\$36.35
92133	SCODI (OCT/HRT), Posterior - optic nerve	Unilateral OR Bilateral	92132* 92134 92227 92228 92250* 99211*	\$44.51
92134	SCODI (OCT/HRT), Posterior - retina	Unilateral OR Bilateral	92132* 92133 92227 92228 92250* 99211*	\$44.51
92235	Fluorescein angiography	Unilateral	92230*	\$130.47
92240	Indocyanine - green angiography	Unilateral	92230* 92250*	\$238.17
92250	Fundus photography	Bilateral	92133* 92134* 92240*	\$73.39
92285	External ocular photography	Bilateral	92020*	\$27.86
92286	Special anterior segment photography with cell count	Bilateral		\$118.58
92287	Special anterior segment photography - with FA	Bilateral		\$116.20
<b>Perimetry</b>				
92081	Visual field exam - limited exam	Unilateral OR Bilateral	92082 92083	\$48.59
92082	Visual field exam - intermediate exam	Unilateral OR Bilateral	92081 92083	\$67.61
92083	Visual field exam - extended exam	Unilateral OR Bilateral	92081 92082	\$84.26

\* These codes may be billed with a modifier if the clinical circumstances are justified. See item 2 below.

<sup>(1)</sup> Bilateral means the procedure is expected to be done on both eyes and the payment amount accounts for both eyes. Unilateral means the procedure is for a single eye; if both eyes are scanned, billing/payment would be twice the rate. Unilateral OR Bilateral indicates that the payment amount is the same regardless if one or both eyes are scanned.

<sup>(2)</sup> The National Correct Coding Initiative (NCCI) was developed by CMS and restricts billing certain codes together for the same patient on the same date of service. In some cases, certain NCCI edit code pairs may still be billed together with the use of a modifier, but only if the clinical circumstances are justified.

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