**Medical Policy**

**Title:** Fundus Photography

**Professional**
Original Effective Date: November 1, 2004
Revision Date(s): August 1, 2005; August 30, 2006; March 14, 2011; July 25, 2012; March 13, 2013; December 11, 2013; April 14, 2015; October 1, 2015; April 13, 2016; October 1, 2016; April 28, 2017; October 1, 2017
Current Effective Date: April 28, 2017

**Institutional**
Original Effective Date: February 1, 2005
Revision Date(s): August 1, 2005; August 30, 2006; March 14, 2011; July 25, 2012; March 13, 2013; December 11, 2013; April 14, 2015; October 1, 2015; April 13, 2016; October 1, 2016; April 28, 2017; October 1, 2017
Current Effective Date: April 28, 2017

State and Federal mandates and health plan member contract language, including specific provisions/exclusions, take precedence over Medical Policy and must be considered first in determining eligibility for coverage. To verify a member's benefits, contact Blue Cross and Blue Shield of Kansas Customer Service.

The BCBSKS Medical Policies contained herein are for informational purposes and apply only to members who have health insurance through BCBSKS or who are covered by a self-insured group plan administered by BCBSKS. Medical Policy for FEP members is subject to FEP medical policy which may differ from BCBSKS Medical Policy.

The medical policies do not constitute medical advice or medical care. Treating health care providers are independent contractors and are neither employees nor agents of Blue Cross and Blue Shield of Kansas and are solely responsible for diagnosis, treatment and medical advice.

If your patient is covered under a different Blue Cross and Blue Shield plan, please refer to the Medical Policies of that plan.

**DESCRIPTION**
Fundus photography involves the use of a retinal camera to photograph the regions of the vitreous, retina, choroid, and optic nerve. Fundus photography is indicated to document abnormalities related to disease processes affecting the eye or to follow the progress of the disease, and is considered medically necessary for such conditions such as macular degeneration, retinal neoplasms, choroid disturbances and diabetic retinopathy, or to identify glaucoma, multiple sclerosis, and other central nervous system abnormalities.
POLICY

A. Fundus photography is considered **medically necessary** for any of the following indications:
   1. Benign neoplasm of choroid
   2. Carcinoma in situ of eye
   3. Chorioretinal inflammation, scars, and other disorders of choroid
   4. Color vision deficiencies
   5. Congenital anomalies of posterior segment of eye
   6. Diabetic retinopathy
   7. Disorders of aromatic amino-acid metabolism affecting the fundus
   8. Disorders of optic nerve and visual pathways
   9. Glaucoma and glaucoma suspects
   10. Hamartoses involving the eye
   11. Malignant neoplasm of eye
   12. Other retinal disorders
   13. Penetration of eyeball with magnetic or non-magnetic foreign body
   14. Retinal detachment and defects
   15. Syphilitic retrobulbar neuritis

B. Fundus photography is considered **medically necessary** for abnormal ocular conditions associated with:
   1. Congenital rubella
   2. Histoplasmosis
   3. Human immunodeficiency virus (HIV) disease
   4. Lupus erythematosus
   5. Multiple sclerosis
   6. Pseudotumor cerebri
   7. Rheumatoid arthritis and other inflammatory polyarthropathies
   8. Sickle cell anemia
   9. Systemic lupus erythematosus
   10. Toxoplasmosis
   11. Tuberous sclerosis

C. Fundus photography is considered **experimental / investigational** for all other indications.
CODING

The following codes for treatment and procedures applicable to this policy are included below for informational purposes. Inclusion or exclusion of a procedure, diagnosis or device code(s) does not constitute or imply member coverage or provider reimbursement. Please refer to the member’s contract benefits in effect at the time of service to determine coverage or non-coverage of these services as it applies to an individual member.

CPT/HCPCS
92250 Fundus photography with interpretation and report

ICD-9 Diagnoses
042 Human immunodeficiency virus (HIV) disease
084.0 Malaria
084.9
094.85 Syphilitic retrobulbar neuritis
115.02 Infection by Histoplasma capsulatum, retinitis
115.12 Infection by Histoplasma duboisii, retinitis
115.92 Histoplasmosis, unspecified, retinitis
130.1 Conjunctivitis due to toxoplasmosis
130.2 Chorioretinitis due to toxoplasmosis
190.0 Malignant neoplasm of eye
190.9
198.4 Secondary malignant neoplasm of other parts of nervous system
224.0 Benign neoplasm of eyeball, except conjunctiva, cornea, retina, and choroid
224.5 Benign neoplasm of retina
224.6 Benign neoplasm of choroid
225.1 Benign neoplasm of cranial nerves
234.0 Carcinoma in situ of eye
239.81 Neoplasm of unspecified nature of retina and choroid
249.00- Diabetes mellitus
250.93
270.2 Other disturbances of aromatic amino-acid metabolism
282.60- Sickle-cell disease
282.69
340 Multiple sclerosis
348.2 Benign intracranial hypertension [pseudotumor cerebri]
360.00- Disorders of the globe
360.89
361.00- Retinal detachment and defects
361.9
362.01- Other retinal disorders
362.9
363.00- Chorioretinal inflammations, scars, and other disorders of choroid
363.9
365.00- Glaucoma
365.9
368.51- Color vision deficiencies
368.59
377.00- Disorders of optic nerve and visual pathways
377.9
379.21- Disorders of vitreous body
379.29
379.32 Subluxation of lens
379.34 Posterior dislocation of lens
695.4 Lupus erythematosus
710.0 Systemic lupus erythematosus
714.0- Rheumatoid arthritis and other inflammatory polyarthropathies
714.9
743.51- Congenital anomalies of posterior segment
743.59
759.5 Tuberous sclerosis
759.6 Other hamartoses, not elsewhere classified
759.81- Other specified anomalies
759.89
771.0 Congenital rubella
794.11 Abnormal retinal function studies
794.12 Abnormal electro-oculogram (EOG)
794.13 Abnormal visually evoked potential
794.14 Abnormal oculomotor studies
871.5 Penetration of eyeball with magnetic foreign body
871.6 Penetration of eyeball with (nonmagnetic) foreign body
961.4 Poisoning by antimalarials and drugs acting on other blood protozoa
[hydroxychloroquine toxicity]
961.5 Poisoning by other antiprotozoal drugs
V58.69 Long-term (current) drug use; other high-risk medications

ICD-10 Diagnoses
A18.53 Tuberculous chorioretinitis
B39.4 Histoplasmosis capsulati, unspecified
B39.5 Histoplasmosis duboisi
B39.9 Histoplasmosis, unspecified
B58.01 Toxoplasma chorioretinitis
B58.09 Other toxoplasma oculopathy
C69.01 Malignant neoplasm of right conjunctiva
C69.02 Malignant neoplasm of left conjunctiva
C69.11 Malignant neoplasm of right cornea
C69.12 Malignant neoplasm of left cornea
C69.21 Malignant neoplasm of right retina
C69.22 Malignant neoplasm of left retina
C69.31 Malignant neoplasm of right choroid
C69.32 Malignant neoplasm of left choroid
C69.41 Malignant neoplasm of right ciliary body
C69.42 Malignant neoplasm of left ciliary body
C69.51 Malignant neoplasm of right lacrimal gland and duct
C69.52 Malignant neoplasm of left lacrimal gland and duct
C69.61 Malignant neoplasm of right orbit
C69.62  Malignant neoplasm of left orbit
C69.81  Malignant neoplasm of overlapping sites of right eye and adnexa
C69.82  Malignant neoplasm of overlapping sites of left eye and adnexa
C69.91  Malignant neoplasm of unspecified site of right eye
C69.92  Malignant neoplasm of unspecified site of left eye
D09.21  Carcinoma in situ of right eye
D09.22  Carcinoma in situ of left eye
D31.21  Benign neoplasm of right retina
D31.22  Benign neoplasm of left retina
D31.31  Benign neoplasm of right choroid
D31.32  Benign neoplasm of left choroid
D31.41  Benign neoplasm of right ciliary body
D31.42  Benign neoplasm of left ciliary body
D49.81  Neoplasm of unspecified behavior of retina and choroid
D57.00  Hb-SS disease with crisis, unspecified
D57.1   Sickle-cell disease without crisis
D57.20  Sickle-cell/Hb-C disease without crisis
D57.219 Sickle-cell/Hb-C disease with crisis, unspecified
D57.80  Other sickle-cell disorders without crisis
D57.819 Other sickle-cell disorders with crisis, unspecified
E08.311 Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy with macular edema
E08.319 Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy without macular edema
E08.3211 Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, right eye
E08.3212 Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, left eye
E08.3213 Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3291 Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, right eye
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E08.3533  Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
E08.3541  Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
E08.3542  Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
E08.3543  Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
E08.3551  Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, right eye
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E08.3592 Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, left eye
E08.3593 Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, bilateral
E08.36 Diabetes mellitus due to underlying condition with diabetic cataract
E08.39 Diabetes mellitus due to underlying condition with other diabetic ophthalmic complication
E08.51 Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy without gangrene
E08.52 Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy with gangrene
E08.59 Diabetes mellitus due to underlying condition with other circulatory complications
E09.311 Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy with macular edema
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Contains Public Information
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<td>Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye</td>
</tr>
<tr>
<td>E13.3512</td>
<td>Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye</td>
</tr>
<tr>
<td>E13.3513</td>
<td>Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral</td>
</tr>
<tr>
<td>E13.3521</td>
<td>Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye</td>
</tr>
<tr>
<td>E13.3522</td>
<td>Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye</td>
</tr>
<tr>
<td>E13.3523</td>
<td>Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral</td>
</tr>
<tr>
<td>E13.3531</td>
<td>Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye</td>
</tr>
<tr>
<td>E13.3532</td>
<td>Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye</td>
</tr>
<tr>
<td>E13.3533</td>
<td>Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral</td>
</tr>
<tr>
<td>E13.3541</td>
<td>Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye</td>
</tr>
<tr>
<td>E13.3542</td>
<td>Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye</td>
</tr>
<tr>
<td>E13.3543</td>
<td>Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral</td>
</tr>
<tr>
<td>E13.3551</td>
<td>Other specified diabetes mellitus with stable proliferative diabetic retinopathy, right eye</td>
</tr>
<tr>
<td>E13.3552</td>
<td>Other specified diabetes mellitus with stable proliferative diabetic retinopathy, left eye</td>
</tr>
<tr>
<td>E13.3553</td>
<td>Other specified diabetes mellitus with stable proliferative diabetic retinopathy, bilateral</td>
</tr>
<tr>
<td>E13.3591</td>
<td>Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye</td>
</tr>
<tr>
<td>E13.3592</td>
<td>Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye</td>
</tr>
<tr>
<td>E13.3593</td>
<td>Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral</td>
</tr>
<tr>
<td>E13.36</td>
<td>Other specified diabetes mellitus with diabetic cataract</td>
</tr>
<tr>
<td>E13.39</td>
<td>Other specified diabetes mellitus with other diabetic ophthalmic complication</td>
</tr>
<tr>
<td>E13.51</td>
<td>Other specified diabetes mellitus with diabetic peripheral angiopathy without gangrene</td>
</tr>
<tr>
<td>E13.52</td>
<td>Other specified diabetes mellitus with diabetic peripheral angiopathy with gangrene</td>
</tr>
<tr>
<td>E70.20</td>
<td>Disorder of tyrosine metabolism, unspecified</td>
</tr>
<tr>
<td>E70.21</td>
<td>Tyrosinemia</td>
</tr>
<tr>
<td>E70.29</td>
<td>Other disorders of tyrosine metabolism</td>
</tr>
<tr>
<td>E70.30</td>
<td>Albinism, unspecified</td>
</tr>
<tr>
<td>E70.310</td>
<td>X-linked ocular albinism</td>
</tr>
<tr>
<td>E70.311</td>
<td>Autosomal recessive ocular albinism</td>
</tr>
<tr>
<td>E70.318</td>
<td>Other ocular albinism</td>
</tr>
</tbody>
</table>
E70.319 Ocular albinism, unspecified
E70.320 Tyrosinase negative oculocutaneous albinism
E70.321 Tyrosinase positive oculocutaneous albinism
E70.328 Other oculocutaneous albinism
E70.329 Oculocutaneous albinism, unspecified
E70.330 Chediak-Higashi syndrome
E70.331 Hermansky-Pudlak syndrome
E70.338 Other albinism with hematologic abnormality
E70.339 Albinism with hematologic abnormality, unspecified
E70.39 Other specified albinism
E70.5 Disorders of tryptophan metabolism
E70.8 Other disorders of aromatic amino-acid metabolism
E70.9 Disorder of aromatic amino-acid metabolism, unspecified
E78.71 Barth syndrome
E78.72 Smith-Lemli-Opitz syndrome
G93.2 Benign intracranial hypertension
H16.241 Ophthalmia nodosa, right eye
H16.242 Ophthalmia nodosa, left eye
H16.243 Ophthalmia nodosa, bilateral
H21.331 Parasitic cyst of iris, ciliary body or anterior chamber, right eye
H21.332 Parasitic cyst of iris, ciliary body or anterior chamber, left eye
H21.333 Parasitic cyst of iris, ciliary body or anterior chamber, bilateral
H27.111 Subluxation of lens, right eye
H27.112 Subluxation of lens, left eye
H27.113 Subluxation of lens, bilateral
H27.131 Posterior dislocation of lens, right eye
H27.132 Posterior dislocation of lens, left eye
H27.133 Posterior dislocation of lens, bilateral
H30.001 Unspecified focal chorioretinal inflammation, right eye
H30.002 Unspecified focal chorioretinal inflammation, left eye
H30.003 Unspecified focal chorioretinal inflammation, bilateral
H30.011 Focal chorioretinal inflammation, juxtapapillary, right eye
H30.012 Focal chorioretinal inflammation, juxtapapillary, left eye
H30.013 Focal chorioretinal inflammation, juxtapapillary, bilateral
H30.021 Focal chorioretinal inflammation of posterior pole, right eye
H30.022 Focal chorioretinal inflammation of posterior pole, left eye
H30.023 Focal chorioretinal inflammation of posterior pole, bilateral
H30.031 Focal chorioretinal inflammation, peripheral, right eye
H30.032 Focal chorioretinal inflammation, peripheral, left eye
H30.033 Focal chorioretinal inflammation, peripheral, bilateral
H30.041 Focal chorioretinal inflammation, macular or paramacular, right eye
H30.042 Focal chorioretinal inflammation, macular or paramacular, left eye
H30.043 Focal chorioretinal inflammation, macular or paramacular, bilateral
H30.101 Unspecified disseminated chorioretinal inflammation, right eye
H30.102 Unspecified disseminated chorioretinal inflammation, left eye
H30.103 Unspecified disseminated chorioretinal inflammation, bilateral
H30.111 Disseminated chorioretinal inflammation of posterior pole, right eye
H30.112 Disseminated chorioretinal inflammation of posterior pole, left eye
H30.113 Disseminated chorioretinal inflammation of posterior pole, bilateral
H30.121 Disseminated chorioretinal inflammation, peripheral right eye
H30.122 Disseminated chorioretinal inflammation, peripheral, left eye
H30.123 Disseminated chorioretinal inflammation, peripheral, bilateral
H30.131 Disseminated chorioretinal inflammation, generalized, right eye
H30.132 Disseminated chorioretinal inflammation, generalized, left eye
H30.133 Disseminated chorioretinal inflammation, generalized, bilateral
H30.141 Acute posterior multifocal placoid pigment epitheliopathy, right eye
H30.142 Acute posterior multifocal placoid pigment epitheliopathy, left eye
H30.143 Acute posterior multifocal placoid pigment epitheliopathy, bilateral
H30.21 Posterior cyclitis, right eye
H30.22 Posterior cyclitis, left eye
H30.23 Posterior cyclitis, bilateral
H30.811 Harada's disease, right eye
H30.812 Harada's disease, left eye
H30.813 Harada's disease, bilateral
H30.891 Other chorioretinal inflammations, right eye
H30.892 Other chorioretinal inflammations, left eye
H30.893 Other chorioretinal inflammations, bilateral
H30.91 Unspecified chorioretinal inflammation, right eye
H30.92 Unspecified chorioretinal inflammation, left eye
H30.93 Unspecified chorioretinal inflammation, bilateral
H31.001 Unspecified chorioretinal scars, right eye
H31.002 Unspecified chorioretinal scars, left eye
H31.003 Unspecified chorioretinal scars, bilateral
H31.011 Macula scars of posterior pole (postinflammatory) (post-traumatic), right eye
H31.012 Macula scars of posterior pole (postinflammatory) (post-traumatic), left eye
H31.013 Macula scars of posterior pole (postinflammatory) (post-traumatic), bilateral
H31.021 Solar retinopathy, right eye
H31.022 Solar retinopathy, left eye
H31.023 Solar retinopathy, bilateral
H31.091 Other chorioretinal scars, right eye
H31.092 Other chorioretinal scars, left eye
H31.093 Other chorioretinal scars, bilateral
H31.101 Choroidal degeneration, unspecified, right eye
H31.102 Choroidal degeneration, unspecified, left eye
H31.103 Choroidal degeneration, unspecified, bilateral
H31.111 Age-related choroidal atrophy, right eye
H31.112 Age-related choroidal atrophy, left eye
H31.113 Age-related choroidal atrophy, bilateral
H31.121 Diffuse secondary atrophy of choroid, right eye
H31.122 Diffuse secondary atrophy of choroid, left eye
H31.123 Diffuse secondary atrophy of choroid, bilateral
H31.20 Hereditary choroidal dystrophy, unspecified
H31.21 Choroideremia
H31.22 Choroidal dystrophy (central areolar) (generalized) (peripapillary)
H31.23 Gyrate atrophy, choroid
H31.29 Other hereditary choroidal dystrophy
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>H31.301</td>
<td>Unspecified choroidal hemorrhage, right eye</td>
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<td>Unspecified choroidal hemorrhage, left eye</td>
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<td>Unspecified choroidal hemorrhage, bilateral</td>
</tr>
<tr>
<td>H31.311</td>
<td>Expulsive choroidal hemorrhage, right eye</td>
</tr>
<tr>
<td>H31.312</td>
<td>Expulsive choroidal hemorrhage, left eye</td>
</tr>
<tr>
<td>H31.313</td>
<td>Expulsive choroidal hemorrhage, bilateral</td>
</tr>
<tr>
<td>H31.321</td>
<td>Choroidal rupture, right eye</td>
</tr>
<tr>
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<td>Choroidal rupture, left eye</td>
</tr>
<tr>
<td>H31.323</td>
<td>Choroidal rupture, bilateral</td>
</tr>
<tr>
<td>H31.401</td>
<td>Unspecified choroidal detachment, right eye</td>
</tr>
<tr>
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<td>Unspecified choroidal detachment, left eye</td>
</tr>
<tr>
<td>H31.403</td>
<td>Unspecified choroidal detachment, bilateral</td>
</tr>
<tr>
<td>H31.411</td>
<td>Hemorrhagic choroidal detachment, right eye</td>
</tr>
<tr>
<td>H31.412</td>
<td>Hemorrhagic choroidal detachment, left eye</td>
</tr>
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<td>Hemorrhagic choroidal detachment, bilateral</td>
</tr>
<tr>
<td>H31.421</td>
<td>Serous choroidal detachment, right eye</td>
</tr>
<tr>
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<td>Serous choroidal detachment, left eye</td>
</tr>
<tr>
<td>H31.423</td>
<td>Serous choroidal detachment, bilateral</td>
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<tr>
<td>H31.8</td>
<td>Other specified disorders of choroid</td>
</tr>
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<td>Unspecified disorder of choroid</td>
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<td>H32</td>
<td>Chorioretinal disorders in diseases classified elsewhere</td>
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<td>Unspecified retinal detachment with retinal break, right eye</td>
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</tr>
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<td>Unspecified retinal detachment with retinal break, bilateral</td>
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<td>Retinal detachment with single break, left eye</td>
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<td>Retinal detachment with single break, bilateral</td>
</tr>
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<td>Retinal detachment with multiple breaks, right eye</td>
</tr>
<tr>
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<td>Retinal detachment with multiple breaks, left eye</td>
</tr>
<tr>
<td>H33.023</td>
<td>Retinal detachment with multiple breaks, bilateral</td>
</tr>
<tr>
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<td>Retinal detachment with giant retinal tear, right eye</td>
</tr>
<tr>
<td>H33.032</td>
<td>Retinal detachment with giant retinal tear, left eye</td>
</tr>
<tr>
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<td>Retinal detachment with giant retinal tear, bilateral</td>
</tr>
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<td>Retinal detachment with retinal dialysis, right eye</td>
</tr>
<tr>
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<td>Retinal detachment with retinal dialysis, left eye</td>
</tr>
<tr>
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<td>Retinal detachment with retinal dialysis, bilateral</td>
</tr>
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<td>Total retinal detachment, right eye</td>
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<td>Total retinal detachment, left eye</td>
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<tr>
<td>H33.053</td>
<td>Total retinal detachment, bilateral</td>
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<td>Unspecified retinoschisis, right eye</td>
</tr>
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<td>H33.102</td>
<td>Unspecified retinoschisis, left eye</td>
</tr>
<tr>
<td>H33.103</td>
<td>Unspecified retinoschisis, bilateral</td>
</tr>
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<td>Cyst of ora serrata, right eye</td>
</tr>
<tr>
<td>H33.112</td>
<td>Cyst of ora serrata, left eye</td>
</tr>
<tr>
<td>H33.113</td>
<td>Cyst of ora serrata, bilateral</td>
</tr>
<tr>
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<td>Cyst of ora serrata, unspecified eye</td>
</tr>
<tr>
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<td>Parasitic cyst of retina, right eye</td>
</tr>
<tr>
<td>H33.122</td>
<td>Parasitic cyst of retina, left eye</td>
</tr>
</tbody>
</table>
H33.123  Parasitic cyst of retina, bilateral
H33.191  Other retinoschisis and retinal cysts, right eye
H33.192  Other retinoschisis and retinal cysts, left eye
H33.193  Other retinoschisis and retinal cysts, bilateral
H33.21   Serous retinal detachment, right eye
H33.22   Serous retinal detachment, left eye
H33.23   Serous retinal detachment, bilateral
H33.301  Unspecified retinal break, right eye
H33.302  Unspecified retinal break, left eye
H33.303  Unspecified retinal break, bilateral
H33.311  Horseshoe tear of retina without detachment, right eye
H33.312  Horseshoe tear of retina without detachment, left eye
H33.313  Horseshoe tear of retina without detachment, bilateral
H33.321  Round hole, right eye
H33.322  Round hole, left eye
H33.323  Round hole, bilateral
H33.331  Multiple defects of retina without detachment, right eye
H33.332  Multiple defects of retina without detachment, left eye
H33.333  Multiple defects of retina without detachment, bilateral
H33.41   Traction detachment of retina, right eye
H33.42   Traction detachment of retina, left eye
H33.43   Traction detachment of retina, bilateral
H33.8    Other retinal detachments
H34.01   Transient retinal artery occlusion, right eye
H34.02   Transient retinal artery occlusion, left eye
H34.03   Transient retinal artery occlusion, bilateral
H34.11   Central retinal artery occlusion, right eye
H34.12   Central retinal artery occlusion, left eye
H34.13   Central retinal artery occlusion, bilateral
H34.211  Partial retinal artery occlusion, right eye
H34.212  Partial retinal artery occlusion, left eye
H34.213  Partial retinal artery occlusion, bilateral
H34.231  Retinal artery branch occlusion, right eye
H34.232  Retinal artery branch occlusion, left eye
H34.233  Retinal artery branch occlusion, bilateral
H34.8110 Central retinal vein occlusion, right eye, with macular edema
H34.8111 Central retinal vein occlusion, right eye, with retinal neovascularization
H34.8112 Central retinal vein occlusion, right eye, stable
H34.8120 Central retinal vein occlusion, left eye, with macular edema
H34.8121 Central retinal vein occlusion, left eye, with retinal neovascularization
H34.8122 Central retinal vein occlusion, left eye, stable
H34.8130 Central retinal vein occlusion, bilateral, with macular edema
H34.8131 Central retinal vein occlusion, bilateral, with retinal neovascularization
H34.8132 Central retinal vein occlusion, bilateral, stable
H34.821  Venous engorgement, right eye
H34.822  Venous engorgement, left eye
H34.823  Venous engorgement, bilateral
H34.8310 Tributary (branch) retinal vein occlusion, right eye, with macular edema
H34.8311 Tributary (branch) retinal vein occlusion, right eye, with retinal neovascularization
H34.8312 Tributary (branch) retinal vein occlusion, right eye, stable
H34.8320 Tributary (branch) retinal vein occlusion, left eye, with macular edema
H34.8321 Tributary (branch) retinal vein occlusion, left eye, with retinal neovascularization
H34.8322 Tributary (branch) retinal vein occlusion, left eye, stable
H34.8330 Tributary (branch) retinal vein occlusion, bilateral, with macular edema
H34.8331 Tributary (branch) retinal vein occlusion, bilateral, with retinal neovascularization
H34.8332 Tributary (branch) retinal vein occlusion, bilateral, stable
H34.9 Unspecified retinal vascular occlusion
H35.00 Unspecified background retinopathy
H35.011 Changes in retinal vascular appearance, right eye
H35.012 Changes in retinal vascular appearance, left eye
H35.013 Changes in retinal vascular appearance, bilateral
H35.021 Exudative retinopathy, right eye
H35.022 Exudative retinopathy, left eye
H35.023 Exudative retinopathy, bilateral
H35.031 Hypertensive retinopathy, right eye
H35.032 Hypertensive retinopathy, left eye
H35.033 Hypertensive retinopathy, bilateral
H35.041 Retinal micro-aneurysms, unspecified, right eye
H35.042 Retinal micro-aneurysms, unspecified, left eye
H35.043 Retinal micro-aneurysms, unspecified, bilateral
H35.051 Retinal neovascularization, unspecified, right eye
H35.052 Retinal neovascularization, unspecified, left eye
H35.053 Retinal neovascularization, unspecified, bilateral
H35.061 Retinal vasculitis, right eye
H35.062 Retinal vasculitis, left eye
H35.063 Retinal vasculitis, bilateral
H35.071 Retinal telangiectasis, right eye
H35.072 Retinal telangiectasis, left eye
H35.073 Retinal telangiectasis, bilateral
H35.09 Other intraretinal microvascular abnormalities
H35.101 Retinopathy of prematurity, unspecified, right eye
H35.102 Retinopathy of prematurity, unspecified, left eye
H35.103 Retinopathy of prematurity, unspecified, bilateral
H35.111 Retinopathy of prematurity, stage 0, right eye
H35.112 Retinopathy of prematurity, stage 0, left eye
H35.113 Retinopathy of prematurity, stage 0, bilateral
H35.121 Retinopathy of prematurity, stage 1, right eye
H35.122 Retinopathy of prematurity, stage 1, left eye
H35.123 Retinopathy of prematurity, stage 1, bilateral
H35.131 Retinopathy of prematurity, stage 2, right eye
H35.132 Retinopathy of prematurity, stage 2, left eye
H35.133 Retinopathy of prematurity, stage 2, bilateral
H35.141 Retinopathy of prematurity, stage 3, right eye
H35.142 Retinopathy of prematurity, stage 3, left eye
H35.143 Retinopathy of prematurity, stage 3, bilateral
H35.151 Retinopathy of prematurity, stage 4, right eye
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>H35.152</td>
<td>Retinopathy of prematurity, stage 4, left eye</td>
</tr>
<tr>
<td>H35.153</td>
<td>Retinopathy of prematurity, stage 4, bilateral</td>
</tr>
<tr>
<td>H35.161</td>
<td>Retinopathy of prematurity, stage 5, right eye</td>
</tr>
<tr>
<td>H35.162</td>
<td>Retinopathy of prematurity, stage 5, left eye</td>
</tr>
<tr>
<td>H35.163</td>
<td>Retinopathy of prematurity, stage 5, bilateral</td>
</tr>
<tr>
<td>H35.171</td>
<td>Retrolental fibroplasia, right eye</td>
</tr>
<tr>
<td>H35.172</td>
<td>Retrolental fibroplasia, left eye</td>
</tr>
<tr>
<td>H35.173</td>
<td>Retrolental fibroplasia, bilateral</td>
</tr>
<tr>
<td>H35.21</td>
<td>Other non-diabetic proliferative retinopathy, right eye</td>
</tr>
<tr>
<td>H35.22</td>
<td>Other non-diabetic proliferative retinopathy, left eye</td>
</tr>
<tr>
<td>H35.23</td>
<td>Other non-diabetic proliferative retinopathy, bilateral</td>
</tr>
<tr>
<td>H35.30</td>
<td>Unspecified macular degeneration</td>
</tr>
<tr>
<td>H35.310</td>
<td>Nonexudative age-related macular degeneration, right eye, stage unspecified</td>
</tr>
<tr>
<td>H35.311</td>
<td>Nonexudative age-related macular degeneration, right eye, early dry stage</td>
</tr>
<tr>
<td>H35.312</td>
<td>Nonexudative age-related macular degeneration, right eye, intermediate dry stage</td>
</tr>
<tr>
<td>H35.313</td>
<td>Nonexudative age-related macular degeneration, right eye, advanced atrophic with subfoveal involvement</td>
</tr>
<tr>
<td>H35.314</td>
<td>Nonexudative age-related macular degeneration, left eye, stage unspecified</td>
</tr>
<tr>
<td>H35.315</td>
<td>Nonexudative age-related macular degeneration, left eye, early dry stage</td>
</tr>
<tr>
<td>H35.316</td>
<td>Nonexudative age-related macular degeneration, left eye, intermediate dry stage</td>
</tr>
<tr>
<td>H35.317</td>
<td>Nonexudative age-related macular degeneration, left eye, advanced atrophic without subfoveal involvement</td>
</tr>
<tr>
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<td>Nonexudative age-related macular degeneration, left eye, advanced atrophic with subfoveal involvement</td>
</tr>
<tr>
<td>H35.3130</td>
<td>Nonexudative age-related macular degeneration, bilateral, stage unspecified</td>
</tr>
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<td>Nonexudative age-related macular degeneration, bilateral, intermediate dry stage</td>
</tr>
<tr>
<td>H35.3133</td>
<td>Nonexudative age-related macular degeneration, bilateral, advanced atrophic without subfoveal involvement</td>
</tr>
<tr>
<td>H35.3134</td>
<td>Nonexudative age-related macular degeneration, bilateral, advanced atrophic with subfoveal involvement</td>
</tr>
<tr>
<td>H35.3210</td>
<td>Exudative age-related macular degeneration, right eye, stage unspecified</td>
</tr>
<tr>
<td>H35.3211</td>
<td>Exudative age-related macular degeneration, right eye, with active choroidal neovascularization</td>
</tr>
<tr>
<td>H35.3212</td>
<td>Exudative age-related macular degeneration, right eye, with inactive choroidal neovascularization</td>
</tr>
<tr>
<td>H35.3213</td>
<td>Exudative age-related macular degeneration, right eye, with inactive scar</td>
</tr>
<tr>
<td>H35.3220</td>
<td>Exudative age-related macular degeneration, left eye, stage unspecified</td>
</tr>
<tr>
<td>H35.3221</td>
<td>Exudative age-related macular degeneration, left eye, with active choroidal neovascularization</td>
</tr>
<tr>
<td>H35.3222</td>
<td>Exudative age-related macular degeneration, left eye, with inactive choroidal neovascularization</td>
</tr>
<tr>
<td>H35.3223</td>
<td>Exudative age-related macular degeneration, left eye, with inactive scar</td>
</tr>
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<td>Exudative age-related macular degeneration, bilateral, stage unspecified</td>
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<td>H35.3231</td>
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</tr>
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</tbody>
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H35.3233 Exudative age-related macular degeneration, bilateral, with inactive scar
H35.33 Angioid streaks of macula
H35.341 Macular cyst, hole, or pseudohole, right eye
H35.342 Macular cyst, hole, or pseudohole, left eye
H35.343 Macular cyst, hole, or pseudohole, bilateral
H35.351 Cystoid macular degeneration, right eye
H35.352 Cystoid macular degeneration, left eye
H35.353 Cystoid macular degeneration, bilateral
H35.361 Drusen (degenerative) of macula, right eye
H35.362 Drusen (degenerative) of macula, left eye
H35.363 Drusen (degenerative) of macula, bilateral
H35.371 Puckering of macula, right eye
H35.372 Puckering of macula, left eye
H35.373 Puckering of macula, bilateral
H35.381 Toxic maculopathy, right eye
H35.382 Toxic maculopathy, left eye
H35.383 Toxic maculopathy, bilateral
H35.40 Unspecified peripheral retinal degeneration
H35.411 Lattice degeneration of retina, right eye
H35.412 Lattice degeneration of retina, left eye
H35.413 Lattice degeneration of retina, bilateral
H35.421 Microcystoid degeneration of retina, right eye
H35.422 Microcystoid degeneration of retina, left eye
H35.423 Microcystoid degeneration of retina, bilateral
H35.431 Paving stone degeneration of retina, right eye
H35.432 Paving stone degeneration of retina, left eye
H35.433 Paving stone degeneration of retina, bilateral
H35.441 Age-related reticular degeneration of retina, right eye
H35.442 Age-related reticular degeneration of retina, left eye
H35.443 Age-related reticular degeneration of retina, bilateral
H35.451 Secondary pigmentary degeneration, right eye
H35.452 Secondary pigmentary degeneration, left eye
H35.453 Secondary pigmentary degeneration, bilateral
H35.461 Secondary vitreoretinal degeneration, right eye
H35.462 Secondary vitreoretinal degeneration, left eye
H35.463 Secondary vitreoretinal degeneration, bilateral
H35.50 Unspecified hereditary retinal dystrophy
H35.51 Vitreoretinal dystrophy
H35.52 Pigmentary retinal dystrophy
H35.53 Other dystrophies primarily involving the sensory retina
H35.54 Dystrophies primarily involving the retinal pigment epithelium
H35.61 Retinal hemorrhage, right eye
H35.62 Retinal hemorrhage, left eye
H35.63 Retinal hemorrhage, bilateral
H35.70 Unspecified separation of retinal layers
H35.711 Central serous chorioretinopathy, right eye
H35.712 Central serous chorioretinopathy, left eye
H35.713 Central serous chorioretinopathy, bilateral
H35.721  Serous detachment of retinal pigment epithelium, right eye
H35.722  Serous detachment of retinal pigment epithelium, left eye
H35.723  Serous detachment of retinal pigment epithelium, bilateral
H35.731  Hemorrhagic detachment of retinal pigment epithelium, right eye
H35.732  Hemorrhagic detachment of retinal pigment epithelium, left eye
H35.733  Hemorrhagic detachment of retinal pigment epithelium, bilateral
H35.81   Retinal edema
H35.82   Retinal ischemia
H35.89   Other specified retinal disorders
H35.9    Unspecified retinal disorder
H36      Retinal disorders in diseases classified elsewhere
H40.001  Preglaucoma, unspecified, right eye
H40.002  Preglaucoma, unspecified, left eye
H40.003  Preglaucoma, unspecified, bilateral
H40.011  Open angle with borderline findings, low risk, right eye
H40.012  Open angle with borderline findings, low risk, left eye
H40.013  Open angle with borderline findings, low risk, bilateral
H40.021  Open angle with borderline findings, high risk, right eye
H40.022  Open angle with borderline findings, high risk, left eye
H40.023  Open angle with borderline findings, high risk, bilateral
H40.031  Anatomical narrow angle, right eye
H40.032  Anatomical narrow angle, left eye
H40.033  Anatomical narrow angle, bilateral
H40.041  Steroid responder, right eye
H40.042  Steroid responder, left eye
H40.043  Steroid responder, bilateral
H40.051  Ocular hypertension, right eye
H40.052  Ocular hypertension, left eye
H40.053  Ocular hypertension, bilateral
H40.061  Primary angle closure without glaucoma damage, right eye
H40.062  Primary angle closure without glaucoma damage, left eye
H40.063  Primary angle closure without glaucoma damage, bilateral
H40.10x1 Unspecified open-angle glaucoma, mild stage
H40.10x2 Unspecified open-angle glaucoma, moderate stage
H40.10x3 Unspecified open-angle glaucoma, severe stage
H40.10x4 Unspecified open-angle glaucoma, indeterminate stage
H40.111  Primary open-angle glaucoma, right eye
H40.1110 Primary open-angle glaucoma, right eye, stage unspecified
H40.1111 Primary open-angle glaucoma, right eye, mild stage
H40.1112 Primary open-angle glaucoma, right eye, moderate stage
H40.1113 Primary open-angle glaucoma, right eye, severe stage
H40.1114 Primary open-angle glaucoma, right eye, indeterminate stage
H40.112  Primary open-angle glaucoma, left eye
H40.1120 Primary open-angle glaucoma, left eye, stage unspecified
H40.1121 Primary open-angle glaucoma, left eye, mild stage
H40.1122 Primary open-angle glaucoma, left eye, moderate stage
H40.1123 Primary open-angle glaucoma, left eye, severe stage
H40.1124 Primary open-angle glaucoma, left eye, indeterminate stage
H40.113  Primary open-angle glaucoma, bilateral
H40.1130 Primary open-angle glaucoma, bilateral, stage unspecified
H40.1131 Primary open-angle glaucoma, left eye, mild stage
H40.1132 Primary open-angle glaucoma, bilateral, stage unspecified
H40.1133 Primary open-angle glaucoma, bilateral, severe stage
H40.1134 Primary open-angle glaucoma, bilateral, indeterminate stage
H40.1210 Low-tension glaucoma, right eye, stage unspecified
H40.1211 Low-tension glaucoma, right eye, mild stage
H40.1212 Low-tension glaucoma, right eye, moderate stage
H40.1213 Low-tension glaucoma, right eye, severe stage
H40.1214 Low-tension glaucoma, right eye, indeterminate stage
H40.1220 Low-tension glaucoma, left eye, stage unspecified
H40.1221 Low-tension glaucoma, left eye, mild stage
H40.1222 Low-tension glaucoma, left eye, moderate stage
H40.1223 Low-tension glaucoma, left eye, severe stage
H40.1224 Low-tension glaucoma, left eye, indeterminate stage
H40.1230 Low-tension glaucoma, bilateral, stage unspecified
H40.1231 Low-tension glaucoma, bilateral, mild stage
H40.1232 Low-tension glaucoma, bilateral, moderate stage
H40.1233 Low-tension glaucoma, bilateral, severe stage
H40.1234 Low-tension glaucoma, bilateral, indeterminate stage
H40.1311 Pigmentary glaucoma, right eye, mild stage
H40.1312 Pigmentary glaucoma, right eye, moderate stage
H40.1313 Pigmentary glaucoma, right eye, severe stage
H40.1314 Pigmentary glaucoma, right eye, indeterminate stage
H40.1320 Pigmentary glaucoma, left eye, stage unspecified
H40.1321 Pigmentary glaucoma, left eye, mild stage
H40.1322 Pigmentary glaucoma, left eye, moderate stage
H40.1323 Pigmentary glaucoma, left eye, severe stage
H40.1324 Pigmentary glaucoma, left eye, indeterminate stage
H40.1330 Pigmentary glaucoma, bilateral, stage unspecified
H40.1331 Pigmentary glaucoma, bilateral, mild stage
H40.1332 Pigmentary glaucoma, bilateral, moderate stage
H40.1333 Pigmentary glaucoma, bilateral, severe stage
H40.1334 Pigmentary glaucoma, bilateral, indeterminate stage
H40.141 Capsular glaucoma with pseudoexfoliation of lens, right eye
H40.142 Capsular glaucoma with pseudoexfoliation of lens, left eye
H40.143 Capsular glaucoma with pseudoexfoliation of lens, bilateral
H40.1511 Residual stage of open-angle glaucoma, right eye, mild stage
H40.1512 Residual stage of open-angle glaucoma, right eye, moderate stage
H40.1513 Residual stage of open-angle glaucoma, right eye, severe stage
H40.1514 Residual stage of open-angle glaucoma, right eye, indeterminate stage
H40.1521 Residual stage of open-angle glaucoma, left eye, mild stage
H40.1522 Residual stage of open-angle glaucoma, left eye, moderate stage
H40.1523 Residual stage of open-angle glaucoma, left eye, severe stage
H40.1524 Residual stage of open-angle glaucoma, left eye, indeterminate stage
H40.1531 Residual stage of open-angle glaucoma, bilateral, mild stage
H40.1532 Residual stage of open-angle glaucoma, bilateral, moderate stage
H40.1533 Residual stage of open-angle glaucoma, bilateral, severe stage
H40.1534 Residual stage of open-angle glaucoma, bilateral, indeterminate stage
H40.20x1  Unspecified primary angle-closure glaucoma, mild stage
H40.20x2  Unspecified primary angle-closure glaucoma, moderate stage
H40.20x3  Unspecified primary angle-closure glaucoma, severe stage
H40.20x4  Unspecified primary angle-closure glaucoma, indeterminate stage
H40.211  Acute angle-closure glaucoma, right eye
H40.212  Acute angle-closure glaucoma, left eye
H40.213  Acute angle-closure glaucoma, bilateral
H40.2211 Chronic angle-closure glaucoma, right eye, mild stage
H40.2212 Chronic angle-closure glaucoma, right eye, moderate stage
H40.2213 Chronic angle-closure glaucoma, right eye, severe stage
H40.2214 Chronic angle-closure glaucoma, right eye, indeterminate stage
H40.2221 Chronic angle-closure glaucoma, left eye, mild stage
H40.2222 Chronic angle-closure glaucoma, left eye, moderate stage
H40.2223 Chronic angle-closure glaucoma, left eye, severe stage
H40.2224 Chronic angle-closure glaucoma, left eye, indeterminate stage
H40.2231 Chronic angle-closure glaucoma, bilateral, mild stage
H40.2232 Chronic angle-closure glaucoma, bilateral, moderate stage
H40.2233 Chronic angle-closure glaucoma, bilateral, severe stage
H40.2234 Chronic angle-closure glaucoma, bilateral, indeterminate stage
H40.231  Intermittent angle-closure glaucoma, right eye
H40.232  Intermittent angle-closure glaucoma, left eye
H40.233  Intermittent angle-closure glaucoma, bilateral
H40.241  Residual stage of angle-closure glaucoma, right eye
H40.242  Residual stage of angle-closure glaucoma, left eye
H40.243  Residual stage of angle-closure glaucoma, bilateral
H40.31x1 Glaucoma secondary to eye trauma, right eye, mild stage
H40.31x2 Glaucoma secondary to eye trauma, right eye, moderate stage
H40.31x3 Glaucoma secondary to eye trauma, right eye, severe stage
H40.32x0 Glaucoma secondary to eye trauma, left eye, stage unspecified
H40.32x1 Glaucoma secondary to eye trauma, left eye, mild stage
H40.32x2 Glaucoma secondary to eye trauma, left eye, moderate stage
H40.32x3 Glaucoma secondary to eye trauma, left eye, severe stage
H40.32x4 Glaucoma secondary to eye trauma, left eye, indeterminate stage
H40.33x0 Glaucoma secondary to eye trauma, bilateral, stage unspecified
H40.33x1 Glaucoma secondary to eye trauma, bilateral, mild stage
H40.33x2 Glaucoma secondary to eye trauma, bilateral, moderate stage
H40.33x3 Glaucoma secondary to eye trauma, bilateral, severe stage
H40.33x4 Glaucoma secondary to eye trauma, bilateral, indeterminate stage
H40.40x0 Glaucoma secondary to eye inflammation, unspecified eye, stage unspecified
H40.41x0 Glaucoma secondary to eye inflammation, right eye, stage unspecified
H40.41x1 Glaucoma secondary to eye inflammation, right eye, mild stage
H40.41x2 Glaucoma secondary to eye inflammation, right eye, moderate stage
H40.41x3 Glaucoma secondary to eye inflammation, right eye, severe stage
H40.41x4 Glaucoma secondary to eye inflammation, right eye, indeterminate stage
H40.42x0 Glaucoma secondary to eye inflammation, left eye, stage unspecified
H40.42x1 Glaucoma secondary to eye inflammation, left eye, mild stage
H40.42x2 Glaucoma secondary to eye inflammation, left eye, moderate stage
H40.42x3  Glaucoma secondary to eye inflammation, left eye, severe stage
H40.42x4  Glaucoma secondary to eye inflammation, left eye, indeterminate stage
H40.43x0  Glaucoma secondary to eye inflammation, bilateral, stage unspecified
H40.43x1  Glaucoma secondary to eye inflammation, bilateral, mild stage
H40.43x2  Glaucoma secondary to eye inflammation, bilateral, moderate stage
H40.43x3  Glaucoma secondary to eye inflammation, bilateral, severe stage
H40.43x4  Glaucoma secondary to eye inflammation, bilateral, indeterminate stage
H40.51x1  Glaucoma secondary to other eye disorders, right eye, mild stage
H40.51x2  Glaucoma secondary to other eye disorders, right eye, moderate stage
H40.51x3  Glaucoma secondary to other eye disorders, right eye, severe stage
H40.51x4  Glaucoma secondary to other eye disorders, right eye, indeterminate stage
H40.52x1  Glaucoma secondary to other eye disorders, left eye, mild stage
H40.52x2  Glaucoma secondary to other eye disorders, left eye, moderate stage
H40.52x3  Glaucoma secondary to other eye disorders, left eye, severe stage
H40.52x4  Glaucoma secondary to other eye disorders, left eye, indeterminate stage
H40.53x1  Glaucoma secondary to other eye disorders, bilateral, mild stage
H40.53x2  Glaucoma secondary to other eye disorders, bilateral, moderate stage
H40.53x3  Glaucoma secondary to other eye disorders, bilateral, severe stage
H40.53x4  Glaucoma secondary to other eye disorders, bilateral, indeterminate stage
H40.60x1  Glaucoma secondary to drugs, unspecified eye, mild stage
H40.60x2  Glaucoma secondary to drugs, unspecified eye, moderate stage
H40.60x3  Glaucoma secondary to drugs, unspecified eye, severe stage
H40.60x4  Glaucoma secondary to drugs, unspecified eye, indeterminate stage
H40.61x1  Glaucoma secondary to drugs, right eye, mild stage
H40.61x2  Glaucoma secondary to drugs, right eye, moderate stage
H40.61x3  Glaucoma secondary to drugs, right eye, severe stage
H40.61x4  Glaucoma secondary to drugs, right eye, indeterminate stage
H40.62x1  Glaucoma secondary to drugs, left eye, mild stage
H40.62x2  Glaucoma secondary to drugs, left eye, moderate stage
H40.62x3  Glaucoma secondary to drugs, left eye, severe stage
H40.62x4  Glaucoma secondary to drugs, left eye, indeterminate stage
H40.63x1  Glaucoma secondary to drugs, bilateral, mild stage
H40.63x2  Glaucoma secondary to drugs, bilateral, moderate stage
H40.63x3  Glaucoma secondary to drugs, bilateral, severe stage
H40.63x4  Glaucoma secondary to drugs, bilateral, indeterminate stage
H40.811  Glaucoma with increased episcleral venous pressure, right eye
H40.812  Glaucoma with increased episcleral venous pressure, left eye
H40.813  Glaucoma with increased episcleral venous pressure, bilateral
H40.819  Glaucoma with increased episcleral venous pressure, unspecified eye
H40.821  Hypersecretion glaucoma, right eye
H40.822  Hypersecretion glaucoma, left eye
H40.823  Hypersecretion glaucoma, bilateral
H40.829  Hypersecretion glaucoma, unspecified eye
H40.831  Aqueous misdirection, right eye
H40.832  Aqueous misdirection, left eye
H40.833  Aqueous misdirection, bilateral
H40.89  Other specified glaucoma
H40.9  Unspecified glaucoma
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>H42</td>
<td>Glaucoma in diseases classified elsewhere</td>
</tr>
<tr>
<td>H43.01</td>
<td>Vitreous prolapse, right eye</td>
</tr>
<tr>
<td>H43.02</td>
<td>Vitreous prolapse, left eye</td>
</tr>
<tr>
<td>H43.03</td>
<td>Vitreous prolapse, bilateral</td>
</tr>
<tr>
<td>H43.11</td>
<td>Vitreous hemorrhage, right eye</td>
</tr>
<tr>
<td>H43.12</td>
<td>Vitreous hemorrhage, left eye</td>
</tr>
<tr>
<td>H43.13</td>
<td>Vitreous hemorrhage, bilateral</td>
</tr>
<tr>
<td>H43.21</td>
<td>Crystalline deposits in vitreous body, right eye</td>
</tr>
<tr>
<td>H43.22</td>
<td>Crystalline deposits in vitreous body, left eye</td>
</tr>
<tr>
<td>H43.23</td>
<td>Crystalline deposits in vitreous body, bilateral</td>
</tr>
<tr>
<td>H43.311</td>
<td>Vitreous membranes and strands, right eye</td>
</tr>
<tr>
<td>H43.312</td>
<td>Vitreous membranes and strands, left eye</td>
</tr>
<tr>
<td>H43.313</td>
<td>Vitreous membranes and strands, bilateral</td>
</tr>
<tr>
<td>H43.391</td>
<td>Other vitreous opacities, right eye</td>
</tr>
<tr>
<td>H43.392</td>
<td>Other vitreous opacities, left eye</td>
</tr>
<tr>
<td>H43.393</td>
<td>Other vitreous opacities, bilateral</td>
</tr>
<tr>
<td>H43.811</td>
<td>Vitreous degeneration, right eye</td>
</tr>
<tr>
<td>H43.812</td>
<td>Vitreous degeneration, left eye</td>
</tr>
<tr>
<td>H43.813</td>
<td>Vitreous degeneration, bilateral</td>
</tr>
<tr>
<td>H43.821</td>
<td>Vitreomacular adhesion, right eye</td>
</tr>
<tr>
<td>H43.822</td>
<td>Vitreomacular adhesion, left eye</td>
</tr>
<tr>
<td>H43.823</td>
<td>Vitreomacular adhesion, bilateral</td>
</tr>
<tr>
<td>H43.89</td>
<td>Other disorders of vitreous body</td>
</tr>
<tr>
<td>H44.001</td>
<td>Unspecified purulent endophthalmitis, right eye</td>
</tr>
<tr>
<td>H44.002</td>
<td>Unspecified purulent endophthalmitis, left eye</td>
</tr>
<tr>
<td>H44.003</td>
<td>Unspecified purulent endophthalmitis, bilateral</td>
</tr>
<tr>
<td>H44.011</td>
<td>Panophthalmitis (acute), right eye</td>
</tr>
<tr>
<td>H44.012</td>
<td>Panophthalmitis (acute), left eye</td>
</tr>
<tr>
<td>H44.013</td>
<td>Panophthalmitis (acute), bilateral</td>
</tr>
<tr>
<td>H44.021</td>
<td>Vitreous abscess (chronic), right eye</td>
</tr>
<tr>
<td>H44.022</td>
<td>Vitreous abscess (chronic), left eye</td>
</tr>
<tr>
<td>H44.023</td>
<td>Vitreous abscess (chronic), bilateral</td>
</tr>
<tr>
<td>H44.111</td>
<td>Panuveitis, right eye</td>
</tr>
<tr>
<td>H44.112</td>
<td>Panuveitis, left eye</td>
</tr>
<tr>
<td>H44.113</td>
<td>Panuveitis, bilateral</td>
</tr>
<tr>
<td>H44.121</td>
<td>Parasitic endophthalmitis, unspecified, right eye</td>
</tr>
<tr>
<td>H44.122</td>
<td>Parasitic endophthalmitis, unspecified, left eye</td>
</tr>
<tr>
<td>H44.123</td>
<td>Parasitic endophthalmitis, unspecified, bilateral</td>
</tr>
<tr>
<td>H44.131</td>
<td>Sympathetic uveitis, right eye</td>
</tr>
<tr>
<td>H44.132</td>
<td>Sympathetic uveitis, left eye</td>
</tr>
<tr>
<td>H44.133</td>
<td>Sympathetic uveitis, bilateral</td>
</tr>
<tr>
<td>H44.19</td>
<td>Other endophthalmitis</td>
</tr>
<tr>
<td>H44.2A1</td>
<td>Degenerative myopia with choroidal neovascularization, right eye</td>
</tr>
<tr>
<td>H44.2A2</td>
<td>Degenerative myopia with choroidal neovascularization, left eye</td>
</tr>
<tr>
<td>H44.2A3</td>
<td>Degenerative myopia with choroidal neovascularization, bilateral eye</td>
</tr>
<tr>
<td>H44.2B1</td>
<td>Degenerative myopia with macular hole, right eye</td>
</tr>
<tr>
<td>H44.2B2</td>
<td>Degenerative myopia with macular hole, left eye</td>
</tr>
<tr>
<td>H44.2B3</td>
<td>Degenerative myopia with macular hole, bilateral eye</td>
</tr>
</tbody>
</table>
H44.2C1 Degenerative myopia with retinal detachment, right eye
H44.2C2 Degenerative myopia with retinal detachment, left eye
H44.2C3 Degenerative myopia with retinal detachment, bilateral eye
H44.2D1 Degenerative myopia with foveoschisis, right eye
H44.2D2 Degenerative myopia with foveoschisis, left eye
H44.2D3 Degenerative myopia with foveoschisis, bilateral eye
H44.2E1 Degenerative myopia with other maculopathy, right eye
H44.2E2 Degenerative myopia with other maculopathy, left eye
H44.2E3 Degenerative myopia with other maculopathy, bilateral eye
H44.21 Degenerative myopia, right eye
H44.22 Degenerative myopia, left eye
H44.23 Degenerative myopia, bilateral
H44.30 Unspecified degenerative disorder of globe
H44.311 Chalcosis, right eye
H44.312 Chalcosis, left eye
H44.313 Chalcosis, bilateral
H44.321 Siderosis of eye, right eye
H44.322 Siderosis of eye, left eye
H44.323 Siderosis of eye, bilateral
H44.391 Other degenerative disorders of globe, right eye
H44.392 Other degenerative disorders of globe, left eye
H44.393 Other degenerative disorders of globe, bilateral
H44.40 Unspecified hypotony of eye
H44.411 Flat anterior chamber hypotony of right eye
H44.412 Flat anterior chamber hypotony of left eye
H44.413 Flat anterior chamber hypotony of eye, bilateral
H44.421 Hypotony of right eye due to ocular fistula
H44.422 Hypotony of left eye due to ocular fistula
H44.423 Hypotony of eye due to ocular fistula, bilateral
H44.431 Hypotony of eye due to other ocular disorders, right eye
H44.432 Hypotony of eye due to other ocular disorders, left eye
H44.433 Hypotony of eye due to other ocular disorders, bilateral
H44.441 Primary hypotony of right eye
H44.442 Primary hypotony of left eye
H44.443 Primary hypotony of eye, bilateral
H44.50 Unspecified degenerated conditions of globe
H44.511 Absolute glaucoma, right eye
H44.512 Absolute glaucoma, left eye
H44.513 Absolute glaucoma, bilateral
H44.521 Atrophy of globe, right eye
H44.522 Atrophy of globe, left eye
H44.523 Atrophy of globe, bilateral
H44.531 Leucocoria, right eye
H44.532 Leucocoria, left eye
H44.533 Leucocoria, bilateral
H44.601 Unspecified retained (old) intraocular foreign body, magnetic, right eye
H44.602 Unspecified retained (old) intraocular foreign body, magnetic, left eye
H44.603 Unspecified retained (old) intraocular foreign body, magnetic, bilateral
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>H44.611</td>
<td>Retained (old) magnetic foreign body in anterior chamber, right eye</td>
</tr>
<tr>
<td>H44.612</td>
<td>Retained (old) magnetic foreign body in anterior chamber, left eye</td>
</tr>
<tr>
<td>H44.613</td>
<td>Retained (old) magnetic foreign body in anterior chamber, bilateral</td>
</tr>
<tr>
<td>H44.621</td>
<td>Retained (old) magnetic foreign body in iris or ciliary body, right eye</td>
</tr>
<tr>
<td>H44.622</td>
<td>Retained (old) magnetic foreign body in iris or ciliary body, left eye</td>
</tr>
<tr>
<td>H44.623</td>
<td>Retained (old) magnetic foreign body in iris or ciliary body, bilateral</td>
</tr>
<tr>
<td>H44.631</td>
<td>Retained (old) magnetic foreign body in lens, right eye</td>
</tr>
<tr>
<td>H44.632</td>
<td>Retained (old) magnetic foreign body in lens, left eye</td>
</tr>
<tr>
<td>H44.633</td>
<td>Retained (old) magnetic foreign body in lens, bilateral</td>
</tr>
<tr>
<td>H44.641</td>
<td>Retained (old) magnetic foreign body in posterior wall of globe, right eye</td>
</tr>
<tr>
<td>H44.642</td>
<td>Retained (old) magnetic foreign body in posterior wall of globe, left eye</td>
</tr>
<tr>
<td>H44.643</td>
<td>Retained (old) magnetic foreign body in posterior wall of globe, bilateral</td>
</tr>
<tr>
<td>H44.651</td>
<td>Retained (old) magnetic foreign body in vitreous body, right eye</td>
</tr>
<tr>
<td>H44.652</td>
<td>Retained (old) magnetic foreign body in vitreous body, left eye</td>
</tr>
<tr>
<td>H44.653</td>
<td>Retained (old) magnetic foreign body in vitreous body, bilateral</td>
</tr>
<tr>
<td>H44.691</td>
<td>Retained (old) intraocular foreign body, magnetic, in other or multiple sites, right eye</td>
</tr>
<tr>
<td>H44.692</td>
<td>Retained (old) intraocular foreign body, magnetic, in other or multiple sites, left eye</td>
</tr>
<tr>
<td>H44.693</td>
<td>Retained (old) intraocular foreign body, magnetic, in other or multiple sites, bilateral</td>
</tr>
<tr>
<td>H44.701</td>
<td>Unspecified retained (old) intraocular foreign body, nonmagnetic, right eye</td>
</tr>
<tr>
<td>H44.702</td>
<td>Unspecified retained (old) intraocular foreign body, nonmagnetic, left eye</td>
</tr>
<tr>
<td>H44.703</td>
<td>Unspecified retained (old) intraocular foreign body, nonmagnetic, bilateral</td>
</tr>
<tr>
<td>H44.711</td>
<td>Retained (nonmagnetic) (old) foreign body in anterior chamber, right eye</td>
</tr>
<tr>
<td>H44.712</td>
<td>Retained (nonmagnetic) (old) foreign body in anterior chamber, left eye</td>
</tr>
<tr>
<td>H44.713</td>
<td>Retained (nonmagnetic) (old) foreign body in anterior chamber, bilateral</td>
</tr>
<tr>
<td>H44.721</td>
<td>Retained (nonmagnetic) (old) foreign body in iris or ciliary body, right eye</td>
</tr>
<tr>
<td>H44.722</td>
<td>Retained (nonmagnetic) (old) foreign body in iris or ciliary body, left eye</td>
</tr>
<tr>
<td>H44.723</td>
<td>Retained (nonmagnetic) (old) foreign body in iris or ciliary body, bilateral</td>
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<td>H44.731</td>
<td>Retained (nonmagnetic) (old) foreign body in lens, right eye</td>
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<td>H44.732</td>
<td>Retained (nonmagnetic) (old) foreign body in lens, left eye</td>
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<td>H44.733</td>
<td>Retained (nonmagnetic) (old) foreign body in lens, bilateral</td>
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<tr>
<td>H44.741</td>
<td>Retained (nonmagnetic) (old) foreign body in posterior wall of globe, right eye</td>
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<td>H44.742</td>
<td>Retained (nonmagnetic) (old) foreign body in posterior wall of globe, left eye</td>
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<td>H44.743</td>
<td>Retained (nonmagnetic) (old) foreign body in posterior wall of globe, bilateral</td>
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<td>H44.751</td>
<td>Retained (nonmagnetic) (old) foreign body in vitreous body, right eye</td>
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<td>H44.752</td>
<td>Retained (nonmagnetic) (old) foreign body in vitreous body, left eye</td>
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<td>H44.753</td>
<td>Retained (nonmagnetic) (old) foreign body in vitreous body, bilateral</td>
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<tr>
<td>H44.791</td>
<td>Retained (old) intraocular foreign body, nonmagnetic, in other or multiple sites, right eye</td>
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<td>H44.792</td>
<td>Retained (old) intraocular foreign body, nonmagnetic, in other or multiple sites, left eye</td>
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<td>H44.793</td>
<td>Retained (old) intraocular foreign body, nonmagnetic, in other or multiple sites, bilateral</td>
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<tr>
<td>H44.811</td>
<td>Hemophthalmos, right eye</td>
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<tr>
<td>H44.812</td>
<td>Hemophthalmos, left eye</td>
</tr>
<tr>
<td>H44.813</td>
<td>Hemophthalmos, bilateral</td>
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<tr>
<td>H44.821</td>
<td>Luxation of globe, right eye</td>
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<tr>
<td>H44.822</td>
<td>Luxation of globe, left eye</td>
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<tr>
<td>H44.823</td>
<td>Luxation of globe, bilateral</td>
</tr>
<tr>
<td>H44.89</td>
<td>Other disorders of globe</td>
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</tbody>
</table>
H46.01  Optic papillitis, right eye
H46.02  Optic papillitis, left eye
H46.03  Optic papillitis, bilateral
H46.11  Retrobulbar neuritis, right eye
H46.12  Retrobulbar neuritis, left eye
H46.13  Retrobulbar neuritis, bilateral
H46.2   Nutritional optic neuropathy
H46.3   Toxic optic neuropathy
H46.8   Other optic neuritis
H46.9   Unspecified optic neuritis
H47.011 Ischemic optic neuropathy, right eye
H47.012 Ischemic optic neuropathy, left eye
H47.013 Ischemic optic neuropathy, bilateral
H47.021 Hemorrhage in optic nerve sheath, right eye
H47.022 Hemorrhage in optic nerve sheath, left eye
H47.023 Hemorrhage in optic nerve sheath, bilateral
H47.031 Optic nerve hypoplasia, right eye
H47.032 Optic nerve hypoplasia, left eye
H47.033 Optic nerve hypoplasia, bilateral
H47.091 Other disorders of optic nerve, not elsewhere classified, right eye
H47.092 Other disorders of optic nerve, not elsewhere classified, left eye
H47.093 Other disorders of optic nerve, not elsewhere classified, bilateral
H47.11  Papilledema associated with increased intracranial pressure
H47.12  Papilledema associated with decreased ocular pressure
H47.13  Papilledema associated with retinal disorder
H47.141 Foster-Kennedy syndrome, right eye
H47.142 Foster-Kennedy syndrome, left eye
H47.143 Foster-Kennedy syndrome, bilateral
H47.211 Primary optic atrophy, right eye
H47.212 Primary optic atrophy, left eye
H47.213 Primary optic atrophy, bilateral
H47.22  Hereditary optic atrophy
H47.231 Glaucomatous optic atrophy, right eye
H47.232 Glaucomatous optic atrophy, left eye
H47.233 Glaucomatous optic atrophy, bilateral
H47.291 Other optic atrophy, right eye
H47.292 Other optic atrophy, left eye
H47.293 Other optic atrophy, bilateral
H47.311 Coloboma of optic disc, right eye
H47.312 Coloboma of optic disc, left eye
H47.313 Coloboma of optic disc, bilateral
H47.321 Drusen of optic disc, right eye
H47.322 Drusen of optic disc, left eye
H47.323 Drusen of optic disc, bilateral
H47.331 Pseudopapilledema of optic disc, right eye
H47.332 Pseudopapilledema of optic disc, left eye
H47.333 Pseudopapilledema of optic disc, bilateral
H47.391 Other disorders of optic disc, right eye
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<th>Code</th>
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<tr>
<td>H47.392</td>
<td>Other disorders of optic disc, left eye</td>
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<td>H47.393</td>
<td>Other disorders of optic disc, bilateral</td>
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<tr>
<td>H47.41</td>
<td>Disorders of optic chiasm in (due to) inflammatory disorders</td>
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<tr>
<td>H47.42</td>
<td>Disorders of optic chiasm in (due to) neoplasm</td>
</tr>
<tr>
<td>H47.43</td>
<td>Disorders of optic chiasm in (due to) vascular disorders</td>
</tr>
<tr>
<td>H47.49</td>
<td>Disorders of optic chiasm in (due to) other disorders</td>
</tr>
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<td>H47.511</td>
<td>Disorders of visual pathways in (due to) inflammatory disorders, right side</td>
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<td>H47.512</td>
<td>Disorders of visual pathways in (due to) inflammatory disorders, left side</td>
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<td>H47.521</td>
<td>Disorders of visual pathways in (due to) neoplasm, right side</td>
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<td>Disorders of visual pathways in (due to) neoplasm, left side</td>
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<tr>
<td>H47.531</td>
<td>Disorders of visual pathways in (due to) vascular disorders, right side</td>
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<td>H47.532</td>
<td>Disorders of visual pathways in (due to) vascular disorders, left side</td>
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<td>H47.611</td>
<td>Cortical blindness, right side of brain</td>
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<td>H47.612</td>
<td>Cortical blindness, left side of brain</td>
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<td>H47.621</td>
<td>Disorders of visual cortex in (due to) inflammatory disorders, right side</td>
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<td>H47.622</td>
<td>Disorders of visual cortex in (due to) inflammatory disorders, left side</td>
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<td>Disorders of visual cortex in (due to) vascular disorders, left side</td>
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<td>H47.9</td>
<td>Unspecified disorder of visual pathways</td>
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<td>H53.50</td>
<td>Unspecified color vision deficiencies</td>
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<td>Achromatopsia</td>
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<td>Acquired color vision deficiency</td>
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<td>Deuteranomaly</td>
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<td>Protanomaly</td>
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<td>Tritanomaly</td>
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<td>M32.0</td>
<td>Drug-induced systemic lupus erythematosus</td>
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<td>M32.15</td>
<td>Tubulo-interstitial nephropathy in systemic lupus erythematosus</td>
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<td>Other organ or system involvement in systemic lupus erythematosus</td>
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<td>M32.8</td>
<td>Other forms of systemic lupus erythematosus</td>
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<td>M32.9</td>
<td>Systemic lupus erythematosus, unspecified</td>
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<td>P35.0</td>
<td>Congenital rubella syndrome</td>
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<td>Congenital malformation of vitreous humor</td>
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<td>Congenital malformation of retina</td>
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<td>Other congenital malformations of posterior segment of eye</td>
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<td>Q15.0</td>
<td>Congenital glaucoma</td>
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<td>Q85.1</td>
<td>Tuberous sclerosis</td>
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<td>Other phakomatoses, not elsewhere classified</td>
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<td>Q85.9</td>
<td>Phakomatosis, unspecified</td>
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<td>Q87.42</td>
<td>Marfan's syndrome with ocular manifestations</td>
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<td>Q87.5</td>
<td>Other congenital malformation syndromes with other skeletal changes</td>
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Q87.89 Other specified congenital malformation syndromes, not elsewhere classified
Q98.8 Other specified congenital malformations
R94.110 Abnormal electro-oculogram [EOG]
R94.111 Abnormal electroretinogram [ERG]
R94.112 Abnormal visually evoked potential [VEP]
R94.113 Abnormal oculomotor study
S05.51xA Penetrating wound with foreign body of right eyeball, initial encounter
S05.52xA Penetrating wound with foreign body of left eyeball, initial encounter
T37.2x1A Poisoning by antimalarials and drugs acting on other blood protozoa, accidental (unintentional), initial encounter
T37.2x2A Poisoning by antimalarials and drugs acting on other blood protozoa, intentional self-harm, initial encounter
T37.2x3A Poisoning by antimalarials and drugs acting on other blood protozoa, assault, initial encounter
T37.2x4A Poisoning by antimalarials and drugs acting on other blood protozoa, undetermined, initial encounter
T37.3x1A Poisoning by other antiprotozoal drugs, accidental (unintentional), initial encounter
T37.3x2A Poisoning by other antiprotozoal drugs, intentional self-harm, initial encounter
T37.3x3A Poisoning by other antiprotozoal drugs, assault, initial encounter
T37.3x4A Poisoning by other antiprotozoal drugs, undetermined, initial encounter
Z79.899 Other long term (current) drug therapy

REVISIONS

<table>
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<tr>
<td>08-01-2005</td>
<td>This guideline was originally posted to the BCBSKS Web site in February 2005 under the category “Not Medically Necessary Services”. On August 1, 2005, we converted the existing guideline into the medical policy format. The content remains unchanged.</td>
</tr>
<tr>
<td>08-30-2006</td>
<td>In “Policy”, section deleted Extended Fundus Photography (i.e. Optomap®) will be denied as not medically necessary for all screening and diagnostic cases”, and added “Extended Fundus Photography (i.e. Optomap®) or visual field exam billed with an eye examination code (92002, 92004, 92012, or 92014) with a MEDICAL DIAGNOSIS will be reimbursed separately from the medical eye examination service. Extended Fundus Photography (i.e. Optomap®) or visual field exam billed with one of the following eye examination codes (92002, 92004, 92012, or 92014) and a routine ICD-9 diagnosis (for example: V72.0, 367, 367.0, 367.1, 367.2, 367.20, 367.21, 367.32, 367.4, 367.9) is not medically necessary.” at Medical Director’s request.</td>
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<tr>
<td>01-01-2006</td>
<td>In “Coding”, CPT section deleted 92499 and added 92250, at Medical Director’s request.</td>
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<tr>
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<td>In “Reference” added ‘Blue Shield Report, December 13, 2005, S-09-05’ at Medical Director’s request.</td>
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<tr>
<td>03-14-2011</td>
<td>Revised title from &quot;Extended Fundus Photograph (i.e. Optomap)&quot; to &quot;Fundus Photography&quot;.</td>
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<tr>
<td></td>
<td>Description section updated</td>
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<tr>
<td></td>
<td>In Policy section:</td>
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<tr>
<td></td>
<td>• Revised wording to current language from:</td>
</tr>
<tr>
<td></td>
<td>&quot;Extended Fundus Photography (i.e. Optomap®) or visual field exam billed with an eye examination code (92002, 92004, 92012, or 92014) with a MEDICAL DIAGNOSIS will be reimbursed separately from the medical eye examination service. Extended Fundus Photography (i.e. Optomap®) or visual field exam billed with one of the following eye examination codes (92002, 92004, 92012, or 92014) and a routine ICD-9 diagnosis (for example: V72.0, 367, 367.0, 367.1, 367.2, 367.20, 367.21, 367.32, 367.4, 367.9) is not medically necessary.” at Medical Director’s request.</td>
</tr>
<tr>
<td></td>
<td>”Extended Fundus Photography (i.e. Optomap®) or visual field exam billed with one of the following eye examination codes (92002, 92004, 92012, or 92014) and a routine ICD-9 diagnosis (for example: V72.0, 367, 367.0, 367.1, 367.2, 367.20, 367.21, 367.32, 367.4, 367.9) is not medically necessary.” at Medical Director’s request.</td>
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</table>
the following eye examination codes (92002, 92004, 92012, or 92014) and a routine ICD-9 diagnosis (for example: V72.0, 367, 367.0, 367.1, 367.2, 367.20, 367.21, 367.32, 367.4, 367.9) is not medically necessary."

In Coding section:
- Removed CPT Codes: 92081, 92082, 92083
- Revised policy from considering Fundus Photography medically necessary with any Medical Diagnosis (except a routine eye exam) to the following Diagnosis codes: 042, 084.0-084.9, 094.85, 115.02, 115.12, 115.92, 130.1, 130.2, 190.0-190.9, 198.4, 224.0, 224.5, 224.6, 225.1, 234.0, 239.81, 249.00-250.93, 270.2, 282.60-282.69, 340, 348.2, 360.00-360.89, 361.00-361.9, 362.01-362.9, 363.00-363.9, 365.00-365.9, 368.51-368.59, 377.00-377.9, 379.21-379.29, 379.32, 379.34, 695.4, 710.0, 714.0-714.9, 743.51-743.59, 759.5, 759.6, 759.81-759.89, 771.0, 794.11, 794.12, 794.13, 794.14, 871.5, 871.6, 961.4, 961.5.

References section updated.

07-25-2012
In the Policy section:
- In Item A, 22, removed "Monitoring of members for toxicity by anti-malarials such as Plaquenil (hydroxychloroquine) and drugs acting on other blood protozoa" and inserted "Monitoring for ocular toxicity secondary to high-risk medications (i.e., chloroquine (Aralen), hydroxychloroquine (Plaquenil), Interferon alpha-2b, Amiodarone, tamoxifen citrate (Nolvadex), fingolimod (Gilenya), Seroquel)"

In Coding section:
- Added V58.69

Reference section updated.

03-13-2013
Policy reviewed. No changes implemented.

12-11-2013
In Coding section:
- Added ICD-10 Diagnosis (Effective October 1, 2014)

Updated Reference section.

04-14-2015
Policy reviewed; no changes made.

10-01-2015

In Coding section:
- Added ICD-10 code: Z79.899.

04-13-2016
Policy reviewed; no revisions made.

10-01-2016
In Policy section:
- In Item A, removed "2. Abnormal oculomotor studies", "3. Abnormal retinal function studies", "4. Abnormal visually evoked potential", "cranial nerves, eyeball, or retina", "Diabetes mellitus", "Disorders of globe", and "Endophthalmitis" and moved items A 10, 18, 19, 20, 23, 26, 28, 29, 31, 32, and 33 to new Item B.
- Added new Item B, "Fundus photography is considered medically necessary for abnormal ocular conditions associated with:"

In Coding section:

Contains Public Information
| M05.222, M05.231, M05.232, M05.241, M05.242, M05.249, M05.251, M05.252, M05.261, M05.262, M05.269, M05.271, M05.272, M05.279, M05.29, M05.30, M05.311, M05.312, M05.321, M05.322, M05.331, M05.332, M05.341, M05.342, M05.351, M05.352, M05.361, M05.362, M05.369, M05.371, M05.372, M05.379, M05.411, M05.412, M05.421, M05.422, M05.431, M05.432, M05.441, M05.442, M05.451, M05.452, M05.461, M05.462, M05.469, M05.471, M05.472, M05.479, M05.511, M05.512, M05.521, M05.522, M05.531, M05.532, M05.541, M05.542, M05.551, M05.552, M05.561, M05.562, M05.571, M05.572, M05.579, M05.581, M05.59, M05.60, M05.611, M05.612, M05.621, M05.622, M05.631, M05.632, M05.639, M05.641, M05.642, M05.651, M05.652, M05.661, M05.662, M05.669, M05.671, M05.672, M05.689, M05.69, M05.79, M05.811, M05.812, M05.821, M05.822, M05.831, M05.832, M05.841, M05.842, M05.851, M05.852, M05.861, M05.862, M05.871, M05.872, M05.89, M06.011, M06.012, M06.021, M06.022, M06.031, M06.032, M06.041, M06.042, M06.051, M06.052, M06.061, M06.062, M06.071, M06.072, M06.08, M06.089, M06.09, M06.1, M06.211, M06.212, M06.221, M06.222, M06.231, M06.232, M06.241, M06.242, M06.251, M06.252, M06.261, M06.262, M06.271, M06.272, M06.28, M06.29, M06.30, M06.311, M06.312, M06.321, M06.322, M06.331, M06.332, M06.341, M06.342, M06.351, M06.352, M06.361, M06.362, M06.371, M06.372, M06.38, M06.39, M06.4, M06.511, M06.512, M06.521, M06.522, M06.531, M06.532, M06.541, M06.542, M06.551, M06.552, M06.561, M06.562, M06.571, M06.572, M06.59, M06.60, M06.611, M06.612, M06.621, M06.622, M06.631, M06.632, M06.639, M06.641, M06.642, M06.651, M06.652, M06.661, M06.662, M06.671, M06.672, M06.689, M06.811, M06.812, M06.821, M06.822, M06.831, M06.832, M06.841, M06.842, M06.851, M06.852, M06.861, M06.862, M06.871, M06.872, M06.88, M08.00, M08.011, M08.012, M08.021, M08.022, M08.031, M08.032, M08.041, M08.042, M08.051, M08.052, M08.061, M08.062, M08.071, M08.072, M08.08, M08.09, M08.211, M08.212, M08.221, M08.222, M08.231, M08.232, M08.241, M08.242, M08.251, M08.252, M08.261, M08.262, M08.271, M08.272, M08.28, M08.29, M08.3, M08.4, M08.40, M08.41, M08.42, M08.431, M08.432, M08.441, M08.442, M08.451, M08.452, M08.461, M08.462, M08.471, M08.472, M08.48, M08.811, M08.812, M08.821, M08.822, M08.831, M08.832, M08.841, M08.842, M08.851, M08.852, M08.861, M08.862, M08.871, M08.872, M08.88, M08.89, M08.90, M08.911, M08.912, M08.921, M08.922, M08.931, M08.932, M08.941, M08.942, M08.951, M08.952, M08.961, M08.962, M08.971, M08.972, M12.011, M12.012, M12.021, M12.022, M12.031, M12.032, M12.041, M12.042, M12.051, M12.052, M12.061, M12.062, M12.071, M12.072, M12.08, M12.09, M32.10, M32.11, M32.12, M32.13, M32.14, Q87.1, Q87.2, Q87.3, Q87.81, Q99.2.

Updated References section.

**04-28-2017**

In Policy section:
- Removed Item A 1, "Abnormal electro-oculogram (EOG)"
- Removed Item A 13, "Monitoring for ocular toxicity secondary to high-risk medications, i.e. chloroquine (Aralen), hydroxychloroquine (Plaquenil), Interferon alpha-2b, Amiodarone, tamoxifen citrate (Nolvadex), fingolimod (Gilenya), Seroquel"

Updated References section.

**10-01-2017**

In Coding section:
- Added ICD-10 codes: H44.2A1, H44.2A2, H44.2A3, H44.2B1, H44.2B2, H44.2B3, H44.2C1, H44.2C2, H44.2C3, H44.2D1, H44.2D2, H44.2D3, H44.2E1, H44.2E2, H44.2E3.

### REFERENCES


Other References
1. Published in S-09-05 Blue Shield Report effective 1-1-06.
2. Blue Cross and Blue Shield of Kansas Ophthalmology Liaison Committee Consent Ballot, December 2010.
3. Blue Cross and Blue Shield of Kansas Optometry Liaison Committee Consent Ballot, December 2010.
4. Blue Cross and Blue Shield of Kansas Ophthalmology Liaison Committee Meeting, May 2011; May 2012; May 2013; June 2016.
5. Blue Cross and Blue Shield of Kansas Optometry Liaison Committee Meeting, June 2011; May 2012; May 2013; June 2015; August 2016.