

No review or update is scheduled on this Medical Policy. Blue Cross and Blue Shield of Kansas will continue to monitor published literature for any updated information. If there are questions about coverage of this service, please contact Blue Cross and Blue Shield of Kansas customer service, or your professional / institutional relations representative.

Medical Policy



Title: Fundus Photography

Professional / Institutional
Original Effective Date: November 1, 2004 / February 1, 2005
Latest Review Date: November 20, 2024
Current Effective Date: August 15, 2019

Archived Date: November 20, 2024

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.

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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. Tuberosus sclerosis
- C. Fundus photography is considered **not medically necessary** for all other indications.

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.

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CODING

The following codes for treatment and procedures applicable to this policy are included below for informational purposes. This may not be a comprehensive list of procedure codes applicable to this policy.

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.

The code(s) listed below are medically necessary ONLY if the procedure is performed according to the "Policy" section of this document.

CPT/HCPCS	
92250	Fundus photography with interpretation and report

REVISIONS	
08-01-2005	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.
08-30-2006 effective 01-01-2006	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.
	In "Coding", CPT section deleted 92499 and added 92250, at Medical Director's request.
	In "Reference" added 'Blue Shield Report, December 13, 2005, S-09-05' at Medical Director's request.
03-14-2011	Revised title from "Extended Fundus Photograph (i.e. Optomap)" to "Fundus Photography".
	Description section updated
	In Policy section: <ul style="list-style-type: none"> ▪ Revised wording to current language from: "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. <p>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."</p>

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REVISIONS	
	<p>In Coding section:</p> <ul style="list-style-type: none"> ▪ 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. <p>References section updated.</p>
07-25-2012	<p>In the Policy section:</p> <ul style="list-style-type: none"> ▪ 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) <p>In the Coding section:</p> <ul style="list-style-type: none"> ▪ Added V58.69 <p>Reference section updated.</p>
03-13-2013	Policy reviewed. No changes implemented.
12-11-2013	<p>In Coding section:</p> <ul style="list-style-type: none"> ▪ Added ICD-10 Diagnosis (<i>Effective October 1, 2014</i>) <p>Updated Reference section.</p>
04-14-2015	Policy reviewed; no changes made.
10-01-2015	<p>Policy published 12-30-2015. Effective 10-01-2015 with ICD-10 coding implementation.</p> <p>In Coding section:</p> <ul style="list-style-type: none"> ▪ Added ICD-10 code: Z79.899.
04-13-2016	Policy reviewed; no revisions made.
10-01-2016	<p>In Policy section:</p> <ul style="list-style-type: none"> ▪ 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:" <p>In Coding section:</p> <ul style="list-style-type: none"> ▪ Added ICD-10 codes effective 10-01-2016: E08.3211, E08.3212, E08.3213, E08.3291, E08.3292, E08.3293, E08.3311, E08.3312, E08.3313, E8.3391, E08.3392, E08.3393, E08.3411, E08.3412, E08.3413, E08.3491, E08.3492, E08.3493, E08.3511, E08.3512, E08.3513, E08.3521, E08.3522, E08.3523, E08.3531, E08.3532, E08.3533, E08.3541, E08.3542, E08.3543, E08.3551, E08.3552, E08.3553, E08.3591, E08.3592, E08.3593, E09.3211, E09.3212, E09.3213, E09.3291, E09.3292, E09.3293, E09.3311, E09.3312, E09.3313, E09.3391, E09.3392, E09.3393, E09.3411, E09.3412, E09.3413, E09.3491, E09.3492, E09.3493, E09.3511, E09.3512, E09.3513, E09.3521, E09.3522, E09.3523, E09.3531, E09.3532, E09.3533, E09.3541, E09.3542, E09.3543, E09.3551,

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REVISIONS

E09.3552, E09.3553, E09.3591, E09.3592, E09.3593, E10.3211, E10.3212, E10.3213, E10.3291, E10.3292, E10.3293, E10.3311, E10.3312, E10.3313, E10.3391, E10.3392, E10.3393, E10.3411, E10.3412, E10.3413, E10.3491, E10.3492, E10.3493, E10.3511, E10.3512, E10.3513, E10.3521, E10.3522, E10.3523, E10.3531, E10.3532, E10.3533, E10.3541, E10.3542, E10.3543, E10.3551, E10.3552, E10.3553, E10.3591, E10.3592, E10.3593, E11.3211, E11.3212, E11.3213, E11.3291, E11.3292, E11.3293, E11.3311, E11.3312, E11.3313, E11.3391, E11.3392, E11.3393, E11.3411, E11.3412, E11.3413, E11.3491, E11.3492, E11.3493, E11.3511, E11.3512, E11.3513, E11.3521, E11.3522, E11.3523, E11.3531, E11.3532, E11.3533, E11.3541, E11.3542, E11.3543, E11.3551, E11.3552, E11.3553, E11.3591, E11.3592, E11.3593, E13.3211, E13.3212, E13.3213, E13.3291, E13.3292, E13.3293, E13.3311, E13.3312, E13.3313, E13.3391, E13.3392, E13.3393, E13.3511, E13.3512, E13.3513, E13.3521, E13.3522, E13.3523, E13.3531, E13.3532, E13.3533, E13.3541, E13.3542, E13.3543, E13.3551, E13.3552, E13.3553, E13.3491, E13.3492, E13.3493, E13.3411, E13.3412, E13.3413, E13.3491, E13.3492, E13.3493, E13.3591, E13.3592, E13.3593, E13.3511, E13.3512, E13.3513, E13.3521, E13.3522, E13.3523, E13.3531, E13.3532, E13.3533, E13.3541, E13.3542, E13.3543, E13.3551, E13.3552, E13.3553, E13.3591, E13.3592, E13.3593, H34.8110, H34.8111, H34.8112, H34.8120, H34.8121, H34.8122, H34.8130, H34.8131, H34.8132, H34.8310, H34.8311, H34.8312, H34.8320, H34.8321, H34.8322, H34.8330, H34.8331, H34.8332, H35.3110, H35.3111, H35.3112, H35.3113, H35.3114, H35.3120, H35.3121, H35.3122, H35.3124, H35.3130, H35.3131, H35.3132, H35.3133, H35.3134, H35.3210, H35.3211, H35.3212, H35.3213, H35.3220, H35.3221, H35.3222, H35.3223, H35.3230, H35.3231, H35.3232, H35.3233, H40.111, H40.1110, H40.1111, H40.1112, H40.1113, H40.1114, H40.112, H40.1120, H40.1121, H40.1122, H40.1123, H40.1124, H40.113, H40.1130, H40.1131, H40.1132, H40.1133, H40.1134.

- Termed ICD-10 codes effective 09-30-2016: E08.321, E08.329, E08.331, E08.339, E08.341, E08.349, E08.351, E08.359, E09.321, E09.329, E09.331, E09.339, E09.341, E09.349, E09.351, E09.359, E10.321, E10.329, E10.331, E10.339, E10.341, E10.349, E10.351, E10.359, E11.321, E11.329, E11.331, E11.339, E11.341, E11.349, E11.351, E11.359, E13.321, E13.329, E13.331, E13.339, E13.341, E13.349, E13.351, E13.359, H34.811, H34.812, H34.813, H34.831, H34.832, H34.833, H35.31, H35.32, H40.11x1, H40.11x2, H40.11x3, H40.11x4
- Removed ICD-10 codes: A52.15, B20, B50.0, B50.8, B51.0, B51.8, B51.9, B52.0, B52.8, B52.9, B53.0, B53.1, B53.8, C79.32, C79.49, D33.3, D57.01, D57.02, D57.211, D57.212, D57.811, D57.812, E08.00, E08.01, E08.10, E08.11, E08.21, E08.22, E08.29, E08.41, E08.42, E08.43, E08.44, E08.49, E08.610, E08.618, E08.620, E08.621, E08.622, E08.628, E08.630, E08.638, E08.641, E08.649, E08.65, E08.69, E08.8, E08.9, E09.00, E09.01, E09.10, E09.11, E09.21, E09.22, E09.29, E09.41, E09.42, E09.43, E09.44, E09.49, E09.59, E09.610, E09.618, E09.620, E09.621, E09.622, E09.628, E09.630, E09.638, E09.641, E09.649, E09.65, E09.69, E09.8, E09.9, E10.10, E10.11, E10.21, E10.22, E10.29, E10.40, E10.41, E10.42, E10.43, E10.44, E10.49, E10.59, E10.610, E10.618, E10.620, E10.621, E10.622, E10.628, E10.630, E10.638, E10.641, E10.649, E10.65, E10.69, E10.8, E10.9, E11.00, E11.01, E11.21, E11.22, E11.29, E11.40, E11.41, E11.42, E11.43, E11.44, E11.49, E11.59, E11.610, E11.618, E11.620, E11.621, E11.622, E11.628, E11.630, E11.638, E11.641, E11.649, E11.65, E11.69, E11.8, E11.9, E13.00, E13.01, E13.10,

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REVISIONS	
	<p>E13.11, E13.21, E13.22, E13.29, E13.40, E13.41, E13.42, E13.43, E13.44, E13.49, E13.59, E13.610, E13.618, E13.620, E13.621, E13.622, E13.628, E13.630, E13.638, E13.641, E13.649, E13.65, E13.69, E13.8, E13.9, G35, G45.3, M05.011, M05.012, M05.021, M05.022, M05.031, M05.032, M05.041, M05.042, M05.051, M05.052, M05.061, M05.062, M05.071, M05.072, M05.09, M05.111, M05.112, M05.121, M05.122, M05.131, M05.132, M05.141, M05.142, M05.151, M05.152, M05.161, M05.162, M05.171, M05.172, M05.19, M05.20, M05.211, M05.212, M05.221, 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, M05.371, M05.372, M05.39, M05.411, M05.412, M05.421, M05.422, M05.431, M05.432, M05.441, M05.442, M05.451, M05.452, M05.461, M05.462, M05.471, M05.472, M0549, 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, M05.59, 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, M05.671, M05.672, 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, M05.9, 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, M06.09, 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, M06.80, 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, M06.89, 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, M08.40, M08.411, M08.412, M08.421, M08.422, 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.</p> <p>Updated References section.</p>
04-28-2017	<p>In Policy section:</p> <ul style="list-style-type: none"> ▪ 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" <p>Updated References section.</p>

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REVISIONS	
10-01-2017	In Coding section: <ul style="list-style-type: none"> 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.
11-07-2018	In Coding section: <ul style="list-style-type: none"> Removed ICD-9 codes. Amended ICD-10 code: E08.3391. Updated References section.
08-15-2019	Policy posted to the bcbsks.com website on July 3, 2019, with an effective date of August 15, 2019. In Policy section: <ul style="list-style-type: none"> In Item C, removed "experimental / investigational" and added "not medically necessary" to read, "Fundus photography is considered not medically necessary for all other indications." Remainder of policy reviewed; no other revisions made.
10-01-2020	In Coding Section: <ul style="list-style-type: none"> Added: D57.03, D57.09, D57.213, D57.218, D57.813, D57.818, E70.81, E70.89 Removed: E70.8
10-19-2021	Medical policy reviewed without changes
10-11-2022	Medical Policy Reviewed, no changes made
10-10-2023	Updated Coding Section <ul style="list-style-type: none"> Removed ICD-10 Codes
11-20-2024	Medical policy reviewed with no changes made.
11-20-2024	Archived

REFERENCES

- Xact Medicare Services. Fundus Photography. Medicare Medical Policy Bulletin No. M-37. Camp Hill, PA: Xact; April 28, 1997. Available at: <http://www.eyecare.org/ecbc/medicare/fundfoto.html>. Accessed March 24, 2000.
- Louisiana Medicare Services. Fundus photography. Medicare Part B Medical Policy. Baton Rouge, LA: Louisiana Medicare; June 21, 1991. Available at: <http://www.lamedicare.com/provider/medpol/fundpho.asp>. Accessed March 24, 2000.
- American Academy of Ophthalmology (AAO). Age-related macular degeneration. Preferred Practice Pattern. San Francisco, CA: AAO; 2006.
- American Academy of Ophthalmology (AAO). Primary open-angle glaucoma. Preferred Practice Pattern. San Francisco, CA: AAO; 2005.
- American Academy of Ophthalmology (AAO). Primary open-angle glaucoma suspect. Preferred Practice Pattern. San Francisco, CA: AAO; 2005.
- American Academy of Ophthalmology (AAO). Primary angle closure. Preferred Practice Pattern. San Francisco, CA: AAO; 2005.
- American Academy of Ophthalmology (AAO). Diabetic retinopathy. Preferred Practice Pattern. San Francisco, CA: AAO; 2003.

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8. American Academy of Ophthalmology. Posterior vitreous detachment, retinal breaks, and lattice degeneration. Preferred Practice Pattern. San Francisco, CA: AAO; 2003.
9. Wong D. The fundus camera. In: Duane's Clinical Ophthalmology. Vol. 1. Rev. ed. W Tasman, EA Jaeger, eds. Philadelphia, PA: Lippincott Williams & Wilkins; 1999; Ch. 61:1-14.
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