

# Welch Allyn SureSight™ Vision Screener

## 2010 REIMBURSEMENT INFORMATION



### PRIVATE INSURANCE

<b>Coverage</b>	Use of the SureSight in the physician office is usually covered by private payers when medically necessary.
<b>Coding</b>	Coding options for use of the SureSight vary by payer and by plan. There are several coding options for use of the SureSight, including the following: <b>92015</b> Determination of refractive state
<b>Payment</b>	Payment for use of the SureSight varies by payer, plan, and provider contract and may be separately payable in the physician office setting.

### MEDICAID

<b>Coverage</b>	Use of the SureSight in the physician office is usually covered by Medicaid programs when medically necessary.
<b>Coding</b>	Coding options for use of the SureSight vary by state and include: <b>92015</b> Determination of refractive state Local or other codes, determined individually at the state level
<b>Payment</b>	Medicaid payment for use of the SureSight varies by state. Contact the local Medicaid office to determine payment.  CPT 92015 is not covered by Medicare or when performed in a hospital outpatient setting.

### MEDICARE FEE SCHEDULE

Code	National Average <sup>1</sup>	Alabama	San Francisco, CA
<b>92015</b>	\$19.12 Facility*	\$17.82 Facility	\$21.58 Facility
	\$28.87 Non-Facility**	\$26.14 Non-Facility	\$35.62 Non-Facility

Fee Schedule as of 1/1/2010.  
For reference only. Information does not constitute a guarantee of coverage or payment.

<sup>1</sup> National Average Medicare Physician Fee Schedule Amounts: 70 Fed. Reg. 68132-68215 (2005) (to be codified at 42 CFR § 484).

\*Facility: Includes hospitals (inpatient, outpatient, and emergency department), ambulatory surgical centers (ASCs), and skilled nursing facilities (SNFs).

\*\*Non Facility: Includes all other settings.

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## OTHER CONSIDERATIONS

Some payers may have specific requirements for using certain codes, including prior authorization, restricted medical diagnoses, or specialty provider types. For example:

- CPT® code 92015 is categorized as a “Special Ophthalmology Service” by CPT 2009. “Special ophthalmological services describes services in which a special evaluation of part of the visual system is made, which goes beyond the services included under general ophthalmological services, or in which special treatment is given. Special ophthalmological services may be reported in addition to the general ophthalmological services or evaluation and management services.”

Prescription of lenses, when required, is included in 92015. It includes specification of lens type (monofocal, bifocal, other), lens power, axis, prism, absorptive factor, impact resistance, and other factors.

Interpretation and report by the physician is an integral part of special ophthalmological services where indicated. Technical procedures (which may or may not be performed by the physician personally) are often part of the service, but should not be mistaken to constitute the service itself.”

- Include documentation in the patient’s records to indicate medical necessity for a separate service, including:
  - Reason for patient encounter
  - Patient symptoms
  - Who performs the service
  - Time and effort spent in performing procedure
  - Results of the vision screening services provided
- Confirm that proper ICD-9-CM diagnosis codes are reported to justify medical necessity of vision screening procedure(s).
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Be sure to confirm the requirements and specific coding, coverage, medical necessity, and reimbursement guidelines of the payer you are billing before submitting claims by reviewing your managed care contracts, consulting the *Physicians’ Current Procedural Terminology, Fourth Edition (CPT-4)* or *The Federal Register*, or contacting provider services.

Please visit our website at [welchallyn.com/support/customer/service-guarantee.htm](http://welchallyn.com/support/customer/service-guarantee.htm) for additional reimbursement support, a list of frequently asked questions and brochures.

Contact the Welch Allyn Customer Care Line at 1.800.535.6663

Monday through Friday, 9 AM to 5 PM EST for current physician fee schedules for your specific location.

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