

SECTION S:**OPHTHALMOLOGY**

		Fee	Class	Anae
Visits				
5S	Initial Assessment -- of a specific condition includes: pertinent family history, patient history, history of presenting complaint, functional enquiry, examination of affected part(s) or system(s), diagnosis, assessment, necessary treatment, advice to the patient and record of service provided	\$133.00		
7S	Follow-up assessment -- includes: history review, functional enquiry, examination reassessment, necessary treatment, advice to the patient and record of service provided	\$82.00		
8S	Neuro-Ophthalmology follow assessment -- includes history review, functional enquiry, examination reassessment, necessary treatment, advice to the patient and record of service provided (only payable to physicians with approved training in neuro-ophthalmology)	\$94.00		
9S	Consultation -- includes all visits necessary, history and examination, review of laboratory and/or other data and written submission of the consultant's opinion and recommendations to the referring doctor	\$169.00		
10S	Neuro-ophthalmology consultation -- includes all visits necessary, history and examination, review of laboratory and/or other data and written submission of the consultant's opinion and recommendations to the referring doctor (only payable to physicians with approved training in neuro-ophthalmology)	\$251.00		
11S	-- repeat A formal consultation for the same or related condition repeated within 90 days by the same physician. It should not be used for routine follow-up of the patient for which either service code '5' "partial assessment or subsequent review" or service code '7' "follow-up assessment" are appropriate.	\$89.80		
12S	Low vision assessment (limited to one benefit per beneficiary per 12-month period)	\$267.00		
6S	Routine examination of eyes -- means an examination of the eyes that shall include: case history; visual acuity; external examination; assessment of extraocular muscles; convergence testing; pupil response;	\$139.00		

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	accommodation; examination of cornea, lens, media, fundus; determination of refractive error or change; instruction, information and advice to the patient with respect to the status of his/her or their vision and its future management; provision of the necessary prescription.			
	Hospital Care (Not payable with a visit or consultation service on day of admission)			
25S	-- first 10 days, per day	\$60.00 *		
26S	-- 11-20 days, per day	\$60.00 *		
27S	-- 21-30 days, per day	\$60.00 *		
28S	-- thereafter, per day	\$60.00 *		
	Note: for hospital discharge by physicians, see code 725A in Section A.			
	Procedures Additional payments for diagnostic service excluding ECG's, 0, 10 or 42 day operative procedures performed on patients under one (1) year of age are automatically calculated and paid as explained in Section A, Paediatric Age Supplement.			
32S	Tension -- measured with a tonometer -- bilateral	\$25.00 *		D
332S	Diurnal tension curve -- bilateral	\$147.00		D
33S	Gonioscopy -- bilateral	\$25.00 *		D
534S	Formal orthoptic assessment interpretation	\$60.00		D
580S	Corneal pachymetry (repeat by report only) - bilateral	\$16.30 *		D
15S	Cycloplegic Retinoscopy-under 11 years age	\$60.00		D
535S	Orthopic Technical Fee-bilateral-limit of one per year - add to 5S 6S,7S,9S,10S,11S,12S 534S	\$60.00		D
651S	Automated perimetry/specular microscopy/topography technical fee-bilateral-add to 34S,35S,36S,650S,671S - 1 per patient visit	\$27.00		D
579S	Screening visual fields (FDT or similar) technical fee - bilateral-limit of 1 per visit-only payable with 34S	\$4.00		D
	Optical Coherence Tomography (OCT) Not to be used for routine screening of patients and limit of one per year (professional and technical) when billed for monitoring glaucoma patients			
581S	Optical coherence tomography (OCT) - bilateral	\$51.00		D
582S	Optical coherence tomography (OCT) - technical fee	\$51.00 *		D
	Visual Field			
34S	Screening visual field including tangent screen, auto plot-arc perimetry and frequency doubling screening -- bilateral	\$31.00 *		D

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35S	-- central threshold visual field -- bilateral	\$38.80 *	D	
36S	-- peripheral and central visual field -- bilateral	\$79.60 *	D	
422S	Manual static and kinetic perimetry -- bilateral	\$79.60 *	D	
37S	Provocative tests for glaucoma -- bilateral	\$24.40 *	D	
	Fundus examination under general anaesthetic			
39S	-- unilateral or bilateral	\$351.00 *	D	L
	Forced Duction Test			
424S	-- local	\$53.60 *	D	
425S	-- general	\$95.40 *	D	L
	Fundus or Slit Lamp Photography			
652S	Professional component -- bilateral	\$13.90 *	D	
653S	Technical component -- bilateral	\$13.90 *	D	
	Fluorescein Angiography			
40S	-- technical (Apparatus owned by physician and injection by physician. Use 111A if I.V. injection only by the physician)	\$70.00 *	D	
41S	-- professional	\$110.00 *	D	
42S	Visually evoked occipital response interpretation	\$30.00 *	D	
43S	Electroretinography interpretation	\$74.00 *	D	
44S	Electro-oculography interpretation	\$74.00 *	D	
	Color vision assessment (F.M. 100 Hue Test or Pickford Anomaloscope)			
45S	-- technical component	\$17.10 *	D	
46S	-- professional component	\$32.60 *	D	
650S	Contact or non-contact specular microscopy of corneal endothelium -- professional component -- unilateral	\$44.80 *	D	
429S	Laser Inferometry	\$11.00 *	D	
430S	Potential Acuity Meter	\$4.20 *	D	
656S	Exophthalmometry	\$12.80 *	D	
658S	Dark adaptation curve -- both eyes -- professional component	\$40.40 *	D	
661S	Hess or Lees test	\$40.80 *	D	
664S	Indirect ophthalmoscopy with scleral depression for complete examination of fundus and diagraming -- unilateral or bilateral	\$36.80 *	D	
680S	Infrared pupillography -- bilateral	\$42.40	D	
681S	Eye movement videography/ photography -- bilateral	\$42.40	D	
682S	Quantification of relative afferent pupillary defect with neural density filters -- bilateral	\$42.40	D	
683S	Diagnostic pupillary drop testing -- bilateral	\$53.00	D	
	<u>Codes 680S to 683S are only billable by physicians with approved neuro-ophthalmology training.</u>			

Eyelids

60S	Abscess -- incision	\$45.40 *	0	L
62S	Blepharoplasty -- Excision of skin	\$246.10	10	L

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	and/or muscle Insured if interference with visual axis by pre-authorization (see Cosmetic Surgery Protocol - Section N). If accompanied by orbital septal herniation use 276N. Blepharoplasty of lower lid 277N billed only when orbital fat/orbital septal pathology due to endocrine or other disease or ophthalmological confirmation of interference with bifocal lens.			
	Ptosis repair includes associated blepharoplasty.			
63S	Chalazion -- removal	\$122.00 *	10	L
64S	-- under general anaesthetic or IV sedation (includes post-op recovery)	\$245.00 *	10	L
65S	Cauterization -- lid	\$40.80 *	0	L
	Trichiasis			
66S	Epilation -- unilateral	\$44.80 *	0	L
431S	Electrolysis -- unilateral	\$62.10 *	10	L
432S	Cryotherapy -- unilateral	\$121.00	10	L
	Districhiasis			
436S	Permanent repair -- per lid	\$492.20	42	L
67S	Ziegler puncture Tarsorrhaphy	\$58.90 *	10	L
68S	-- temporary or reversal	\$133.00	10	L
69S	-- permanent -- double adhesion	\$326.00	42	L
	Ectropion			
80S	-- surgical repair	\$652.00	42	L
	Entropion			
81S	-- surgical repair	\$652.00	42	L
	Ptosis			
75S	-- simple repair	\$816.00	42	L
439S	-- complicated repair with graded tarsomeuller resection, add	\$196.90	42	L
440S	-- with fascia lata sling, add	\$196.90	42	L
441S	-- with levator excision, add	\$196.90	42	L
442S	-- with aponeurosis reinsertion, add	\$196.90	42	L
	Blepharoplasty included in the bill for ptosis repair.			
	Lid Lengthening			
444S	Graded Meullerectomy	\$738.30	42	L
445S	-- with levator recession, add	\$124.10	42	L
446S	-- with scleral graft, add	\$124.10	42	L
	Eyelid or Conjunctival Tumor			
70S	Excision -- without sutures Excision -- repair with sutures (Use 380N)	\$102.00 *	10	L
77S	Full thickness excision of benign or malignant tumor with plastic repair using conjunctiva	\$367.00	42	L
	Lid Laceration			

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72S	-- simple repair	\$122.00 *	10	L
448S	-- full thickness	\$308.20	42	L
449S	full thickness -- lid margin	\$369.20	42	L
454S	full thickness plus levator division	\$485.00	42	L
73S	-- repair of canaliculus -- old or recent	\$816.00	42	L
	Lid Defect			
450S	closure with rotation flap	\$492.20	42	L
451S	closure with rotation flap plus cantholysis, add	\$124.10	42	L
452S	closure with temporal flap and cantholysis, add	\$326.00	42	L
453S	closure with free posterior lamellar graft, add	\$308.20	42	L
	Upper or lower eyelid bridge flap			
455S	-- first stage	\$984.40	42	L
456S	-- second stage	\$184.00	42	L
457S	Free composite eyelid graft	\$984.40	42	L
458S	Medial Canthoplasty	\$615.30	42	L
	Medial Canthal tendon injury			
459S	-- repair	\$485.00	42	L
460S	-- with boney fixation, add	\$184.00	42	L
461S	Medial or lateral cantholysis	\$247.00	42	L
462S	Lateral canthopexy -- primary	\$485.00	42	L
	Lacrimal Tract			
	Duct Probing			
50S	-- local anaesthesia	\$40.80 *	0	
51S	-- general anaesthesia	\$245.00 *	0	L
52S	Duct probing and insertion of plastic tube or similar method -- total care	\$334.00	10	L
464S	-- with turbinate fracture, add	\$51.00 *	0	L
466S	Tube change or reinsertion -- local or general after 10 days	\$124.10	0	L
54S	Dacryocystectomy	\$453.70	42	L
55S	Dacryocystorhinostomy	\$1,070.00	42	M
468S	-- with lacrimal bypass or canalicular reconstruction, add	\$147.70	42	L
469S	"Three Snip" procedure on punctum	\$147.70	10	L
470S	Canaliculotomy	\$73.80 *	0	L
471S	Closure of punctum by cautery -- unilateral or bilateral	\$147.70	0	L
472S	Drainage of lacrimal sac abscess	\$125.00 *	0	L
573S	Punctual Plugs - per punctum - maximum of 2	\$133.00	10	
	Extraocular Muscles			
	Recession, resection, myotomy, myectomy, oblique weakening or strengthening			
130S	-- first muscle	\$909.00	42	M
131S	-- second muscle -- either eye -- add	\$679.00	42	M
132S	-- any additional muscle(s) -- either	\$234.00	42	M

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		Fee	Class	Anae
133S	eye -- add -- adjustable suture technique per muscle adjusted -- add	\$510.00	42	M
134S	-- two muscle transposition procedure Corneal Collagen Cross-Linking	\$1,633.00	42	M
690S	-- professional fee	\$1,087.00	42	L
691S	-- technical fee	\$1,020.00		L
Conjunctiva -- Cornea -- Sclera				
88S	Removal of corneal tattooing	\$139.00	10	L
89S	Biopsy of conjunctiva	\$85.60 *	D	L
90S	Foreign body or bodies -- removal -- unembedded --embedded	\$41.00 *	0	L
91S	-- local anaesthesia	\$68.40	0	L
106S	-- general anaesthesia	\$226.00	10	L
671S	Corneal topography - interpretation fee (only for corneal pathology, i.e. not billable for refractive surgical assessments) - unilateral or bilateral	\$53.00	D	L
92S	Keratotomy -- superficial	\$734.00	42	L
93S	Keratoplasty -- lamellar	\$1,121.00	42	L
94S	-- penetrating	\$2,029.00	42	M
95S	Pterygium -- any method	\$612.00	42	L
96S	Subconjunctival injection	\$30.60 *	0	L
97S	Corneal ulcer -- cauterization -- initial or repeat	\$36.40 *	0	L
98S	Relaxing corneal incisions following corneal transplantation (Does not apply to radial keratotomy)	\$510.00	42	L
300S	Phototherapeutic keratectomy for anterior scarring, hereditary congenital dystrophy or recurrent erosion syndrome - requires prior approval -- professional fee	\$734.00	42	L
301S	-- technical fee (physician owned equipment)	\$1,957.00 *	42	L
250S	Removal of corneal sutures, by different surgeon or same surgeon beyond post-op period (does not apply to cataract or trabeculectomy corneal suture removal)	\$133.00 *	0	
99S	Conjunctival flap over ulcer or wound -- simple .	\$449.00	42	L
107S	-- Gunderson or complicated	\$1,020.00	42	M
100S	Wounds -- suture -- conjunctiva	\$245.00 *	10	L
101S	-- corneal or sclera -- without complication	\$1,121.00	42	M
102S	-- with prolapse by conjunctivoplasty	\$1,376.00	42	M
103S	Retrobulbar injection of alcohol	\$122.00 *	0	L
104S	Excision of corneal dermoid	\$612.00	42	L
474S	EDTA removal of band keratopathy	\$500.00	10	L

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		Fee	Class	Anae
475S	Conjunctival resection for corneal melt	\$308.20	0	L
476S	Cyanoacrylate for corneal melt	\$459.00	0	L
522S	Re-operation through conjunctivia-for glaucoma, stabismus and sclera buckling surgery-unilateral-can add to 160S, 130S, 131S, 132S, 133S, 169S	\$204.00	42	M
477S	Epikeratophakia	\$1,353.60	42	L
	Pre-authorization required. Insured if:			
	1. Adult aphakia with low endothelial count and intolerance to contact or intraocular lens.			
	2. Pediatric aphakia with failure of visual rehabilitation			
	3. Keratoconus --with contact lens intolerance			
	Not an insured service when done as cosmetic procedure.			
	Iris			
	Iridotomy			
182S	-- laser per eye	\$290.00	10	
478S	-- surgical	\$449.00	42	L
163S	Iridectomy -- surgical	\$449.00	42	L
105S	Iridodialysis repair	\$510.00	42	
164S	Irrigation -- anterior chamber, through corneal incision	\$449.00	42	L
	Synechotomy			
165S	-- anterior chamber, surgical	\$246.10	42	L
187S	-- anterior chamber, laser	\$163.00		L
	Paracentesis			
166S	-- aqueous	\$65.20	0	L
167S	-- vitreous	\$102.00	0	L
186S	Photomydriasis	\$270.70	10	L
	Glaucoma			
180S	Laser trabeculoplasty -- per eye	\$330.00	10	
159S	Cyclodiathermy, cycloelectrolysis or cyclocryotherapy	\$467.60	42	
	Filtering operation			
160S	-- standard	\$1,223.00	42	M
520S	-- with any seton device in the anterior chamber or through pars plana, add	\$530.00	42	
521S	-- with the use of anti-metabolite drugs -- add	\$184.00	42	M
190S	Cyclodialysis Goniotomy and/or goniopuncture	\$184.00	10	L
161S	-- unilateral	\$393.80	42	L
162S	-- repeat	\$246.10	42	L
480S	Post op trabeculectomy - cutting of sutures	\$124.10	0	L
	Lens			
	Cataract			
135S	-- complete treatment -- all forms, child or adult	\$935.20	42	L

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		Fee	Class	Anae
136S	-- Implantation of prosthetic intraocular lens, add	\$196.90 *	42	L
	Prosthetic Intraocular lens			
236S	-- repositioning	\$290.00	0	L
336S	-- removal	\$268.60	10	L
479S	Removal and replacement	\$795.00	42	L
539S	Repositioning with suture of haptic to scleral	\$1,200.00	42	L
	Secondary implantation of lens prosthesis			
142S	-- simple -- intact vitreous	\$714.00	42	L
	Complicated with vitrectomy, use vitrectomy codes			
	Crystalline Lens - Removal of Dislocated			
139S	-- anterior chamber	\$738.30	42	L
137S	Capsulectomy	\$510.00	42	L
138S	Capsulotomy or discission of secondary membranes (surgical)	\$306.00	42	L
189S	Posterior capsulotomy (laser)	\$276.00	10	L
	Complex Cataracts			
673S	Pupil expansion device, insertion and removal-unilateral-can be added to 135S, 139S, 142S, 226S, 236S, 220S, 230S	\$175.00	42	L
674S	Capsular tension ring or segment insertion-unilateral-can be added to 135S, 139S, 142S, 226S, 236S	\$175.00	42	L
675S	Capsular staining by any method-unilateral-can be added to 135S, 139S, 142S, 226S, 236S	\$51.00	42	L
	Sclera			
481S	Scleral Patch Graft	\$861.40	42	M
482S	Noniatrogenic scleral dehiscence or rupture -- repair	\$369.20	42	M
483S	Tumor of ciliary body	By Report	42	M
171S	Posterior sclerotomy with or without insufflation of anterior chamber	\$306.00	10	L
	Orbit			
108S	Harvesting of donor eyes -- one or both -- for corneal transplant	\$612.00	0	L
109S	Exenteration	\$1,427.00	42	M
110S	Abscess -- incision and drainage	\$563.00	42	L
111S	Enucleation	\$918.00	42	M
112S	-- with insertion of an integrated orbital ocular implant in scleral shell, add	\$245.00	42	M
113S	Extruded implant - replace - secondary operation	\$581.00	42	L
540S	Secondary drilling of integrated orbital implant	\$381.00	42	L
	Dermal Fat Graft			
313S	Immediate following enucleation	\$430.10	42	L
485S	-- delayed replacement of extruded	\$984.40	42	L

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		Fee	Class	Anae
	implant by graft			
78S	Fornix Restoration -- minor	\$714.00	42	L
487S	-- with mucous membrane graft, add	\$247.00	42	L
488S	-- with autogenous conjunctival transplant, add	\$246.10	42	L
413S	Reversal of anophthalmic socket with secondary integrated implant	\$683.00	42	L
	Tumor			
114S	Excise anterior tumor -- simple removal	\$999.00	42	M
489S	Excise posterior tumor	\$1,554.00	42	M
490S	Biopsy anterior tumor	\$667.00	10	L
491S	Biopsy posterior tumor	\$918.00	10	L
292S	Exploration of orbital floor or medial wall for suspected blowout fracture	\$450.00	42	M
293S	Repair of orbital blowout fracture (floor or medial wall) -- first wall	\$1,000.00	42	M
294S	Repair of orbital blowout fracture (floor or medial wall) -- second wall, add -- by report	\$600.00	42	M
119S	Lateral orbitotomy (Kronlein's procedure) or other decompression by report	\$1,937.00	42	M
	Retina			
170S	Retinal tear, complete treatment by diathermy, cryosurgery or laser	\$492.20	42	L
174S	Retinal tumor -- treatment by laser	\$800.40	42	L
670S	Retinal photography - interpretation fee -- bilateral	\$53.00 *	D	
	Diabetic retinopathy or similar vascular abnormality, treatment by laser -- per eye			
175S	-- initial treatment session	\$590.60	42	L
176S	-- subsequent treatment per session	\$296.00	0	L
177S	Retinal degeneration or detachment -- treatment by diathermy, cryosurgery, or laser with or without hole	\$492.20	42	L
178S	Peripheral retinal diathermy, cryosurgery or photocoagulation	\$492.20	42	L
169S	Scleral buckling for retinal detachment includes -- diathermy, cryo or laser (includes 232S)	\$1,580.00	42	M
251S	Removal of scleral buckle hardware by different surgeon or same surgeon beyond post-op period	\$212.00	10	L
275S	Retinopathy of prematurity (preterm infants) (by laser), unilateral	\$1,020.00	42	H
	Macula			
493S	Photocoagulation of choroidal neovascular membrane	\$492.20	42	L
494S	-- subsequent treatment	\$369.20	42	L
495S	Focal Photocoagulation of significant diabetic macular edema	\$492.20	42	L
496S	-- subsequent treatment	\$369.20	42	L

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	Grid and focal therapy not billed together. Maximum benefit billable under codes 493S to 496S in any six consecutive month period per eye. May be exceeded if extenuating circumstances (by report)	\$1,476.60		
497S	Photodynamic therapy (Visudyne) approved for cases of pathologic myopia or the classic form or age related macular degeneration in patients with predominately subfoveal choroidal neovascularization and choroidal neurovascularization secondary to histoplasmosis -- unilateral	\$697.00	42	L
	Vitreous			
	Anterior vitrectomy -- planned			
220S	-- with or without penetrating wound	\$577.80	42	M
222S	-- with corneoscleral laceration repair, add	\$209.70	42	M
223S	-- with uveal tissue prolapse and repair, add	\$147.70	42	M
224S	-- with lensectomy, add	\$196.90	42	L
136S	-- Implantation of prosthetic intraocular lens, add	\$196.90 *	42	L
	Posterior vitrectomy -- planned (includes anterior vitrectomy)			
230S	-- pars plana	\$1,448.00	42	M
757S	-- with intravitreal injection of silicone oil, add	\$184.00	42	L
232S	-- with endophotocoagulation, add	\$247.00 *	42	L
224S	-- with lensectomy, add	\$196.90	42	L
225S	-- with preretinal membrane peeling, add	\$492.20	42	L
136S	-- Implantation of prosthetic intraocular lens, add	\$196.90 *	42	L
325S	-- removal of dislocated crystalline lens or cataract from the vitreol cavity, add	\$734.00	42	L
226S	Posterior vitrectomy with cataract extraction via separate anterior approach (includes lensectomy), add	\$674.10	42	M
515S	Air/gas/fluid exchange, add	\$308.20	42	L
516S	Air/gas/fluid exchange, repeat	\$184.00	0	L
233S	Removal of foreign body from anterior chamber (magnetic or non magnetic), add	\$124.10	42	L
234S	Removal of foreign body from posterior chamber (magnetic or non magnetic), add	\$247.00	42	M
141S	Removal of foreign body from anterior or posterior chamber or vitreous without vitrectomy -- any method	\$612.00	42	M
252S	Post-operative vitreous cavity washout by different surgeon or same surgeon beyond post-op period	\$246.10	0	L
	Intraocular fluid/gas exchange			
254S	-- independent procedure	\$369.20	42	L
517S	-- removal	\$247.00	42	L

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755S	Vitreous tap with intravitreal injection of antibiotic/steroids in the management of bacterial endophthalmitis	\$387.00	0	L
756S	Intravitreal injection of drugs	\$204.00	0	L
518S	Pneumatic retinopexy with cryotherapy	\$1,009.00	42	M
	Dissection of vitreous bands or membranes with Yag laser			
285S	-- anterior segment	\$345.00	42	
286S	-- posterior segment	\$738.30	42	
625S	Amniotic membrane transplantation-unilateral-second eye same day paid at 75%	\$765.00	42	M
	Laser Technical Fees			
181S	-per eye (unilateral)-may be added to 170S, 174S, 175S, 176S, 178S, 180S, 182S, 186S, 187S, 189S, 285S, 286S, 493S, 494S, 495S, 496S, 497S - laser owned and maintained by physician	\$60.00		D