Local Coverage Article: Glaucoma Screening (A53495)

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Contractor Information

Contractor Name Contract Type		Contract Number Jurisdiction State(s)		
Palmetto GBA	A and B MAC	10112 - MAC B	J - J	Alabama
Palmetto GBA	A and B MAC	10212 - MAC B	J - J	Georgia
Palmetto GBA	A and B MAC	10312 - MAC B	J - J	Tennessee
Palmetto GBA	A and B and HHH MA	C 11202 - MAC B	J - M	South Carolina
Palmetto GBA	A and B and HHH MA	C 11302 - MAC B	J - M	Virginia
Palmetto GBA	A and B and HHH MA	C 11402 - MAC B	J - M	West Virginia
Palmetto GBA	A and B and HHH MA	C 11502 - MAC B	J - M	North Carolina
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Article Information

General Information

Article ID A53495

Original ICD-9 Article ID A53485

Article TitleGlaucoma Screening

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Original Article Effective Date

10/01/2015

Revision Effective Date

02/26/2018

Revision Ending Date

N/A

Retirement Date

N/A

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Article Guidance

Article Text:

Medicare coverage of glaucoma screenings was implemented with the Benefits Improvement and Protection Act of 2000 (BIPA).

A glaucoma screening is defined to include:

- A dilated eye examination with an intraocular pressure (IOP) measurement
- A direct ophthalmoscopy examination or a slit-lamp biomicroscopic examination

Medicare covers glaucoma screening for the following persons considered to be at high risk for developing this disease:

- Individuals with diabetes mellitus
- Individuals with a family history of glaucoma
- African-Americans age 50 or over
- Hispanics-Americans 65 or older

Glaucoma screening frequency limitations and payment information:

- Medicare pays for this service annually (i.e., at least 11 full months must have passed following the month in which the last Medicare-covered glaucoma screening examination was performed)
 - Services rendered more frequently than allowed under this screening benefit may require that the beneficiary be given an Advance Beneficiary Notice (ABN)
- The beneficiary will pay 20 percent as the co-payment or coinsurance after meeting the yearly Part B deductible

Medical record documentation requirements:

 Medical record documentation to support that the beneficiary is a member of one of the high risk groups, as defined above

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- Documentation must support one of the screening defined:
 - A dilated eye examination with IOP measurement and direct ophthalmoscopic examination, or a slit -lamp biomicroscopic examination

Procedure and Diagnosis Code Information:

HCPCS Codes	HCPCS Code Descriptors/Modifier	Diagnosis Code
G0117	Glaucoma screening for high risk patient furnished by an optometrist or ophthalmologist	Z13.5 (Encounter for Screening for Eye and Ear Disorders)
G0118	Glaucoma screening for high risk patient furnished under the direct supervision of optometrist or ophthalmologist	Z13.5 (Encounter for Screening for Eye and Ear Disorders)

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Coding Information

Bill Type Codes:

Contractors may specify Bill Types to help providers identify those Bill Types typically used to report this service. Absence of a Bill Type does not guarantee that the article does not apply to that Bill Type. Complete absence of all Bill Types indicates that coverage is not influenced by Bill Type and the article should be assumed to apply equally to all claims.

N/A

Revenue Codes:

Contractors may specify Revenue Codes to help providers identify those Revenue Codes typically used to report this service. In most instances Revenue Codes are purely advisory. Unless specified in the article, services reported under other Revenue Codes are equally subject to this coverage determination. Complete absence of all Revenue Codes indicates that coverage is not influenced by Revenue Code and the article should be assumed to apply equally to all Revenue Codes.

N/A

CPT/HCPCS Codes Group 1 Paragraph: N/A

Group 1 Codes:

Group 1
CPT/HCPCS Code

Group 1 CPT/HCPCS Code Description

GLAUCOMA SCREENING FOR HIGH RISK PATIENTS FURNISHED BY AN OPTOMETRIST OR

OPHTHALMOLOGIST

GLAUCOMA SCREENING FOR HIGH RISK PATIENT FURNISHED UNDER THE DIRECT

SUPERVISION OF AN OPTOMETRIST OR OPHTHALMOLOGIST

ICD-10 Codes that are Covered Group 1 Paragraph: N/A

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Group 1 Codes:

ICD-10 Codes that are covered Information Table

Code

Description

Z13.5 Encounter for screening for eye and ear disorders

ICD-10 Codes that are Not Covered N/A

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Revision History Information

Revision Revision History Date Number	Revision History Explanation
02/26/2018 R4	The Jurisdiction "J" Part B Contracts for Alabama (10112), Georgia (10212) and Tennessee (10312) are now being serviced by Palmetto GBA. Effective 02/26/18, these three contract numbers are being added to this article. No coverage, coding or other substantive changes (beyond the addition of the 3 Part B contract numbers) have been completed in this revision.
04/14/2016 R3	Under Article Text changed "and" to "or" in the 5th and 6th bullet and corrected grammatical errors.
10/01/2015 R2	Under Associated Documents , Statutory Requirements, added the web site links to Title XVIII of the Social Security Act §1862(a)(1)(A) and Title XVIII of the Social Security Act §1833(e).
10/01/2015 R1	Added HCPCS/ICD-10 codes from Article Text to the HCPCS/ICD-10 Coding section.

Back to Top Related Local Coverage Document(s) N/A

Related National Coverage Document(s) N/A

Statutory Requirements URL(s) N/A

Rules and Regulations URL(s) N/A

CMS Manual Explanations URL(s) N/A

Other URL(s) N/A

Public Version(s) Updated on 01/31/2018 with effective dates 02/26/2018 - N/A <u>Updated on 04/05/2016 with effective dates 04/14/2016 - N/A</u> Some older versions have been archived. Please visit <u>MCD Archive Site</u> to retrieve them. Back to Top

Keywords

- Glaucoma
- Screening

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