

OPHTHALMOLOGICAL SERVICES

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I. CPT¹ PROCEDURE CODE RANGES

92002 - 92060, 92070 - 92335, 92390 - 92499

II. DESCRIPTION

Ophthalmological services may include an examination and other specialized services. The purpose of an examination is to diagnose or treat a medical condition of the eye, eyelid, lacrimal system, or orbit. A "routine eye examination" is an evaluation of the eyes, including but not limited to refractive services, that is not related to a medical or surgical condition or to the medical or surgical treatment of a covered illness or injury.

III. POLICY

A. For all beneficiaries, ophthalmological services (including refractive services) provided in connection with the medical or surgical treatment of a covered illness or injury are covered.

B. Section 632 of P.L. 98-525 signed into effect on October 19, 1994, authorizes payment under TRICARE for one routine eye examination per year per person for dependents of active duty members.

1. Routine eye examinations as defined in 32 CFR 199.2 includes coverage of those services rendered in order to determine the refractive state of the eyes. The CPT² procedure codes for payment of routine eye examinations are as follows:

92002 - EYE EXAM, NEW PATIENT
92004 - EYE EXAM, NEW PATIENT
92012 - EYE EXAM, ESTABLISHED PATIENT
92014 - EYE EXAM & TREATMENT
92015 - REFRACTION
99172 - OCULAR FUNCTION SCREEN
99173 - VISUAL ACUITY SCREEN

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TRICARE POLICY MANUAL 6010.54-M, AUGUST 1, 2002

CHAPTER 7, SECTION 6.1
OPHTHALMOLOGICAL SERVICES

2. TRICARE Prime active duty family members may receive an annual routine eye examination from any network provider without referral, authorization, or preauthorization from the Primary Care Manager (PCM), or any other authority; i.e., a Prime active duty family member will be allowed to set up his or her own appointment for a comprehensive eye examination with a network optometrist and/or ophthalmologist. Standard active duty family members may self-refer to an optometrist and/or ophthalmologist regardless of whether or not they are a network provider; i.e., a Standard active duty family member may set up his or her own appointment with either a network or non-network optometrist and/or ophthalmologist. (See Chapter 7, [Sections 2.1](#) and [2.2](#).)

C. For Prime enrollees, see [Chapter 7, Section 2.2](#) for additional information on eye examination.

IV. EXCLUSIONS

A. Coverage may not be extended for “routine eye examinations” provided to beneficiaries other than family members of active duty personnel.

B. Orthoptics, also known as vision training, vision therapy, eye exercises, eye therapy, is excluded by [32 CFR 199.4\(g\)\(46\)](#) (CPT² procedure code 92065).

C. Heidelberg Retina Tomograph (HRT) is unproven.

- END -

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