Dilated Macular Examination

Coding Specifications

Codes required to document patient has age-related macular degeneration and a visit or procedure for ophthalmologic services occurred:

A line item ICD-9-CM diagnosis code for age-related macular degeneration and a CPT code are required to identify patients to be included in this measure.

All measure-specific coding should be reported ON THE SAME CLAIM.

Age-related macular degeneration line item ICD-9-CM diagnosis codes

- 362.50 (macular degeneration [senile], unspecified)
- 362.51 (nonexudative senile macular degeneration)
- 362.52 (exudative senile macular degeneration)

AND

CPT codes

- 92002, 92004
- **92012, 92014**
- 99201, 99202, 99203, 99204, 99205
- 99212, 99213, 99214, 99215
- 99304, 99305, 99306, 99307, 99308, 99309, 99310
- 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337

Quality codes for this measure:

CPT II Code descriptors

(Data collection sheet should be used to determine appropriate code.)

- CPT II 2019F: Dilated macular exam performed, including documentation of the presence or absence of macular thickening or hemorrhage AND the level of macular degeneration severity
- CPT II 2019F-1P: Documentation of medical reason(s) for not performing a dilated macular examination
- **CPT II 2019F-2P:** Documentation of patient reason(s) for not performing a dilated macular examination
- *CPT II 2019F–8P:* Dilated macular exam was not performed, including documentation of the presence or absence of macular thickening or hemorrhage AND the level of macular degeneration severity, reason not otherwise specified

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PQRI 2010 Measure 14, Effective Date 01/01/2010

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