Welch Allyn Spot™ Vision Screener

2016 REIMBURSEMENT INFORMATION



CODING RESOURCE FOR INSTRUMENT-BASED OCULAR SCREENING

PRIVATE INSURANCE

Coverage

Performing instrument-based ocular screening in the physician office may be covered by private payers when medically necessary.

Coding

Coding options will vary by payer and by plan. One code for instrument-based ocular screening is:

99177 Instrument-based ocular screening (e.g., photoscreening, automated-refraction), bilateral; with on-site analysis

99177 is a new code effective 1/1/2016. This code supports instrumentation with a pass/refer indicator and images obtained on site with real-time analysis (e.g, Spot Vision Screener).

Payment

Payment rates for the performance of instrument-based ocular screening vary by payer, plan and provider contract.

MEDICAID

Coverage

Performing automated refraction in the physician office may be covered by Medicaid programs when medically necessary.

Coding

Coding options will vary by state. One code is:

99177 Instrument-based ocular screening (e.g., photoscreening, automated-refraction), bilateral; with on-site analysis

99177 is a new code effective 1/1/2016. This code supports instrumentation with a pass/refer indicator and images obtained on site with real-time analysis (e.g, Spot Vision Screener).

Payment

Medicaid payment for the performance of instrument-based ocular screening varies by state. Contact the local Medicaid office to determine payment.

Information subject to change. Effective 1/1/2016.

For reference only. Information does not constitute a guarantee of coverage or payment.

The information contained in this document is provided for convenience only and represents no statement, promise or guarantee by Welch Allyn concerning coverage or levels of reimbursement. Payment will vary by geographic locality. It is always the provider's responsibility to determine accurate coding, coverage and claim information for the services that were provided.

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MEDICARE

99177 is not covered by Medicare at this time.

Providers should refer to their Medicare Contractor's Local Coverage Determinations for specific coverage and billing guidelines.

OTHER CONSIDERATIONS

The American Academy of Pediatrics (AAP) has released an updated policy statement on instrument-based pediatric vision screening. The AAP states that if available, instrument-based vision screeners can be used at any age but have better success after 18 months of age. Instrument-based screening can be repeated at each annual preventive medicine encounter through 5 years of age or until visual acuity can be assessed reliably using optotypes. Using these techniques in children younger than 6 years can enhance detection of conditions that may lead to amblyopia and/or strabismus compared with traditional methods of assessment.¹

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

- Include documentation in the patient's records to indicate medical necessity for a separate service.
- Confirm that proper ICD-10-CM diagnosis codes are reported to justify medical necessity of vision screening procedure(s).

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Please visit our website at

welchallyn.com/reimbursement

for additional reimbursement support, a list of frequently asked questions and brochures.

For additional questions, please contact Welch Allyn Customer Care at 1.800.535.6663.

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¹American Academy of Pediatrics, Policy Statement: Visual System Assessment in Infants, Children, and Young Adults by Pediatricians, published in Pediatrics, The Official Journal of the American Academy of Pediatrics, January, 2016.