

Provider Type 25 Optometrist

Reimbursement Schedule

This schedule reflects rate data as of : **6/1/2019**

This provider type was last subject to a rate review* on : 11/2016

**Rate review refers to a comprehensive review of all the rates associated with this provider type. In 2017 the NV Legislature passed Assembly Bill 108 which, starting in 2018, requires NV Medicaid to perform a comprehensive rate review for each provider type at least once every four years. These reviews may or may not result in changes to reimbursement amounts.*

Notes:

Procedure codes with a rate of \$0.00 are reimbursed at 62% of Usual and Customary charges unless noted otherwise in Nevada Medicaid policy. CPT codes, descriptions and other data only are copyright © 2008 American Medical Association. All rights reserved. Applicable FARS/DFARS apply. CPT is a registered trademark ® of the American Medical Association.

Proc Code	Description	Mod	Rate	Rate Begin
10004	Fna bx w/o img gdn ea addl		33.51	1/1/2019
10005	Fna bx w/us gdn 1st les		56.35	1/1/2019
10006	Fna bx w/us gdn ea addl		38.37	1/1/2019
10007	Fna bx w/fluor gdn 1st les		72.49	1/1/2019
10008	Fna bx w/fluor gdn ea addl		47.26	1/1/2019
10009	Fna bx w/ct gdn 1st les		87.79	1/1/2019
10010	Fna bx w/ct gdn ea addl		64.17	1/1/2019
10011	Fna bx w/mr gdn 1st les		0.00	1/1/2019
10012	Fna bx w/mr gdn ea addl		0.00	1/1/2019
15730	Mdfc flap w/prsrv vasc pedcl		1198.08	1/1/2018
15733	Musc myoq/fscq flp h&n pedcl		811.83	1/1/2018
65205	REMOVE FOREIGN BODY FROM EYE		45.60	1/1/2017
65210	REMOVE FOREIGN BODY FROM EYE		55.34	1/1/2017
65220	REMOVE FOREIGN BODY FROM EYE		46.18	1/1/2017
65222	REMOVE FOREIGN BODY FROM EYE		54.50	1/1/2017
65430	Corneal smear		93.12	1/1/2017
65435	Curette/treat cornea		65.20	1/1/2017
65436	Curette/treat cornea		317.54	1/1/2017
65450	Treatment of corneal lesion		261.48	1/1/2017
65600	Revision of cornea		317.55	1/1/2017
67820	Revise eyelashes		41.07	1/1/2017
67840	Remove eyelid lesion		220.79	1/1/2017
67938	Remove eyelid foreign body		193.30	1/1/2017
68020	Incise/drain eyelid lining		96.28	1/1/2017
68040	Treatment of eyelid lesions		53.11	1/1/2017
68761	Close tear duct opening		119.28	1/1/2017
68801	Dilate tear duct opening		100.23	1/1/2017
68810	Probe nasolacrimal duct		196.38	1/1/2017
68840	Explore/irrigate tear ducts		104.73	1/1/2017

92002	EYE EXAM NEW PATIENT		77.50	1/1/2017
92004	EYE EXAM NEW PATIENT		140.55	1/1/2017
92012	EYE EXAM ESTABLISH PATIENT		81.17	1/1/2017
92014	EYE EXAM&TX ESTAB PT 1/>VST		117.42	1/1/2017
92015	DETERMINE REFRACTIVE STATE		18.78	1/1/2017
92018	New eye exam & treatment		138.76	1/1/2017
92019	Eye exam & treatment		67.22	1/1/2017
92020	Special eye evaluation		25.94	1/1/2017
92025	Corneal topography	26	18.80	1/1/2017
92025	Corneal topography	TC	17.02	1/1/2017
92025	Corneal topography		35.82	1/1/2017
92060	Special eye evaluation		61.79	1/1/2017
92065	Orthoptic/pleoptic training		50.41	1/1/2017
92071	Contact lens fitting for tx		35.72	1/1/2017
92072	Fit contac lens for managmnt		129.41	1/1/2017
92081	Visual field examination(s)		32.54	1/1/2017
92082	Visual field examination(s)		46.67	1/1/2017
92083	Visual field examination(s)		61.10	1/1/2017
92100	SERIAL TONOMETRY EXAM(S)		75.86	1/1/2017
92132	Cmptr ophth dx img ant segmt	26	18.83	1/1/2017
92132	Cmptr ophth dx img ant segmt	TC	14.98	1/1/2017
92132	Cmptr ophth dx img ant segmt		33.81	1/1/2017
92133	Cmptr ophth img optic nerve	26	26.73	1/1/2017
92133	Cmptr ophth img optic nerve	TC	15.32	1/1/2017
92133	Cmptr ophth img optic nerve		42.05	1/1/2017
92134	Cptr ophth dx img post segmt	26	27.75	1/1/2017
92134	Cptr ophth dx img post segmt	TC	15.32	1/1/2017
92134	Cptr ophth dx img post segmt		43.07	1/1/2017
92136	Ophthalmic biometry		85.15	1/1/2017
92225	Special eye exam initial		25.92	1/1/2017
92226	Special eye exam subsequent		23.25	1/1/2017
92230	Eye exam with photos		55.83	1/1/2017
92235	FLUORESCEIN ANGRPH UNI/BI		103.76	1/1/2017
92240	ICG ANGIOGRAPHY UNI/BI		241.01	1/1/2017
92250	Eye exam with photos		74.44	1/1/2017
92260	Ophthalmoscopy/dynamometry		17.70	1/1/2017
92265	Eye muscle evaluation		72.09	1/1/2017
92270	Electro-oculography		85.05	1/1/2017
92273	Full field erg w/i&r	26	34.38	1/1/2019
92273	Full field erg w/i&r	TC	89.15	1/1/2019
92273	Full field erg w/i&r		123.53	1/1/2019
92274	Multifocal erg w/i&r	26	30.49	1/1/2019
92274	Multifocal erg w/i&r	TC	53.08	1/1/2019
92274	Multifocal erg w/i&r		83.57	1/1/2019
92283	Color vision examination		52.46	1/1/2017
92284	Dark adaptation eye exam		57.44	1/1/2017
92285	Eye photography		19.67	1/1/2017

92286	Internal eye photography		36.07	1/1/2017
92287	Internal eye photography		130.29	1/1/2017
92310	Contact lens fitting		89.93	1/1/2017
92311	Contact lens fitting		96.55	1/1/2017
92312	Contact lens fitting		108.78	1/1/2017
92313	Contact lens fitting		92.70	1/1/2017
92314	Prescription of contact lens		74.72	1/1/2017
92315	Rx cntact lens aphakia 1 eye		69.69	1/1/2017
92316	Rx cntact lens aphakia 2 eye		86.64	1/1/2017
92317	Rx corneoscleral cntact lens		71.68	1/1/2017
92325	Modification of contact lens		39.47	1/1/2017
92326	Replacement of contact lens		34.03	1/1/2017
92340	Fit spectacles monofocal		33.42	1/1/2017
92341	Fit spectacles bifocal		38.01	1/1/2017
92342	Fit spectacles multifocal		40.98	1/1/2017
92352	Fit aphakia spectcl monofocl		38.18	1/1/2017
92353	Fit aphakia spectcl multifoc		44.08	1/1/2017
92354	Fit spectacles single system		12.94	1/1/2017
92355	FIT SPECTACLES COMPOUND LENS		19.74	1/1/2017
92358	Aphakia prosth service temp		10.90	1/1/2017
92370	Repair & adjust spectacles		29.09	1/1/2017
92371	Repair & adjust spectacles		10.90	1/1/2017
92537	Caloric vstblr test w/rec		37.68	1/1/2017
92538	Caloric vstblr test w/rec		19.17	1/1/2017
93264	Rem mntr wrls p-art prs snr		46.70	1/1/2019
99174	OCULAR INSTRUMNT SCREEN BIL		7.16	1/1/2017
99177	Ocular instrumnt screen bil		0.00	1/1/2017
99201	OFFICE/OUTPATIENT VISIT NEW		40.39	1/1/2017
99202	OFFICE/OUTPATIENT VISIT NEW		69.25	1/1/2017
99203	OFFICE/OUTPATIENT VISIT NEW		100.47	1/1/2017
99204	OFFICE/OUTPATIENT VISIT NEW		153.96	1/1/2017
99205	OFFICE/OUTPATIENT VISIT NEW		191.52	1/1/2017
99211	OFFICE/OUTPATIENT VISIT EST		18.75	1/1/2017
99212	OFFICE/OUTPATIENT VISIT EST		40.73	1/1/2017
99213	OFFICE/OUTPATIENT VISIT EST		67.82	1/1/2017
99214	OFFICE/OUTPATIENT VISIT EST		99.94	1/1/2017
99215	OFFICE/OUTPATIENT VISIT EST		133.62	1/1/2017
Q3014	TELEHEALTH FACILITY FEE		24.24	12/1/2015
V2020	Vision svcs frames purchases		79.39	1/1/2017
V2100	Lens sphr single plano 4.00		37.20	1/1/2017
V2101	Single visn sphere 4.12-7.00		49.87	1/1/2017
V2102	Singl visn sphere 7.12-20.00		60.48	1/1/2017
V2103	Spherocylindr 4.00d/12-2.00d		35.53	1/1/2017
V2104	Spherocylindr 4.00d/2.12-4d		37.57	1/1/2017
V2105	Spherocylinder 4.00d/4.25-6d		41.20	1/1/2017
V2106	Spherocylinder 4.00d/>6.00d		49.30	1/1/2017
V2107	Spherocylinder 4.25d/12-2d		53.07	1/1/2017

V2108	Spherocylinder 4.25d/2.12-4d		50.45	1/1/2017
V2109	Spherocylinder 4.25d/4.25-6d		56.70	1/1/2017
V2110	Spherocylinder 4.25d/over 6d		48.56	1/1/2017
V2111	Spherocylindr 7.25d/.25-2.25		57.26	1/1/2017
V2112	Spherocylindr 7.25d/2.25-4d		60.08	1/1/2017
V2113	Spherocylindr 7.25d/4.25-6d		59.59	1/1/2017
V2114	Spherocylinder over 12.00d		64.55	1/1/2017
V2115	Lens lenticular bifocal		89.94	1/1/2017
V2118	Lens aniseikonic single		89.79	1/1/2017
V2121	Lenticular lens, single		95.87	1/1/2017
V2200	Lens spher bifoc plano 4.00d		55.59	1/1/2017
V2201	Lens sphere bifocal 4.12-7.0		67.67	1/1/2017
V2202	Lens sphere bifocal 7.12-20.		62.44	1/1/2017
V2203	Lens sphcyl bifocal 4.00d/.1		60.48	1/1/2017
V2204	Lens sphcy bifocal 4.00d/2.1		61.37	1/1/2017
V2205	Lens sphcy bifocal 4.00d/4.2		60.60	1/1/2017
V2206	Lens sphcy bifocal 4.00d/ove		68.09	1/1/2017
V2207	Lens sphcy bifocal 4.25-7d/.		66.11	1/1/2017
V2208	Lens sphcy bifocal 4.25-7/2.		72.82	1/1/2017
V2209	Lens sphcy bifocal 4.25-7/4.		68.33	1/1/2017
V2210	Lens sphcy bifocal 4.25-7/ov		72.88	1/1/2017
V2211	Lens sphcy bifo 7.25-12/.25-		88.51	1/1/2017
V2212	Lens sphcyl bifo 7.25-12/2.2		83.09	1/1/2017
V2213	Lens sphcyl bifo 7.25-12/4.2		77.39	1/1/2017
V2214	Lens sphcyl bifocal over 12.		87.53	1/1/2017
V2215	Lens lenticular bifocal		107.64	1/1/2017
V2218	Lens aniseikonic bifocal		103.32	1/1/2017
V2219	Lens bifocal seg width over		42.29	1/1/2017
V2220	Lens bifocal add over 3.25d		39.96	1/1/2017
V2221	Lenticular lens, bifocal		111.84	1/1/2017
V2299	Lens bifocal speciality		0.00	1/1/1981
V2300	Lens sphere trifocal 4.00d		68.79	1/1/2017
V2301	Lens sphere trifocal 4.12-7.		84.68	1/1/2017
V2302	Lens sphere trifocal 7.12-20		77.88	1/1/2017
V2303	Lens sphcy trifocal 4.0/.12-		74.19	1/1/2017
V2304	Lens sphcy trifocal 4.0/2.25		76.98	1/1/2017
V2305	Lens sphcy trifocal 4.0/4.25		77.21	1/1/2017
V2306	Lens sphcyl trifocal 4.00/>6		77.85	1/1/2017
V2307	Lens sphcy trifocal 4.25-7/.		83.38	1/1/2017
V2308	Lens sphc trifocal 4.25-7/2.		81.32	1/1/2017
V2309	Lens sphc trifocal 4.25-7/4.		98.45	1/1/2017
V2310	Lens sphc trifocal 4.25-7/>6		83.16	1/1/2017
V2311	Lens sphc trifo 7.25-12/.25-		101.82	1/1/2017
V2312	Lens sphc trifo 7.25-12/2.25		113.46	1/1/2017
V2313	Lens sphc trifo 7.25-12/4.25		126.72	1/1/2017
V2314	Lens sphcyl trifocal over 12		117.63	1/1/2017
V2315	Lens lenticular trifocal		145.92	1/1/2017

V2318	Lens aniseikonic trifocal		185.74	1/1/2017
V2319	Lens trifocal seg width > 28		47.16	1/1/2017
V2320	Lens trifocal add over 3.25d		49.75	1/1/2017
V2321	Lenticular lens, trifocal		138.45	1/1/2017
V2399	Lens trifocal speciality		0.00	1/1/1981
V2410	Lens variab asphericity sing		113.54	1/1/2017
V2430	Lens variable asphericity bi		136.83	1/1/2017
V2500	Contact lens pmma spherical		83.51	1/1/2017
V2501	Cntct lens pmma-toric/prism		131.34	1/1/2017
V2502	Contact lens pmma bifocal		192.17	1/1/2017
V2503	Cntct lens pmma color vision		133.40	1/1/2017
V2510	Cntct gas permeable sphericl		112.27	1/1/2017
V2511	Cntct toric prism ballast		181.44	1/1/2017
V2512	Cntct lens gas permbl bifocl		210.65	1/1/2017
V2513	Contact lens extended wear		193.26	1/1/2017
V2520	Contact lens hydrophilic		99.04	1/1/2017
V2521	Cntct lens hydrophilic toric		172.43	1/1/2017
V2522	Cntct lens hydrophil bifocl		223.74	1/1/2017
V2523	Cntct lens hydrophil extend		143.00	1/1/2017
V2530	Contact lens gas impermeable		178.86	1/1/1981
V2531	Contact lens gas permeable		426.30	1/1/1981
V2599	Contact lens/es other type		0.00	1/1/1981
V2600	Hand held low vision aids		0.00	1/1/1981
V2610	Single lens spectacle mount		0.00	1/1/1981
V2615	Telescop/othr compound lens		0.00	7/1/2009
V2700	Balance lens		55.47	1/1/2017
V2710	Glass/plastic slab off prism		76.89	1/1/2017
V2715	Prism lens/es		14.72	1/1/2017
V2718	Fresnell prism press-on lens		36.15	1/1/2017
V2730	Special base curve		25.94	1/1/2017
V2744	Tint photochromatic lens/es		15.58	1/1/2017
V2745	Tint, any color/solid/grad		10.10	1/1/2017
V2750	Anti-reflective coating		22.70	1/1/2017
V2755	Uv lens/es		15.77	1/1/2017
V2760	Scratch resistant coating		20.28	1/1/2017
V2762	Polarization, any lens		55.56	1/1/2017
V2770	Occluder lens/es		24.71	1/1/2017
V2782	Lens, 1.54-1.65 p/1.60-1.79g		60.02	1/1/2017
V2783	Lens, >= 1.66 p/>=1.80 g		67.67	1/1/2017
V2784	Lens polycarb or equal		44.00	1/1/2017
V2797	Vis item/svc in other code		0.00	1/1/2004
V2799	Misc vision item or service		0.00	1/1/1981