

FLUORESCEIN ANGIOGRAPHY CPT 92235	Original Effective Date:	11/26/2013
	Most Recent Review Date:	08/13/2023
	Latest Revision Date:	11/16/2020

Scope: Guidance applies to fluorescein angiography in ophthalmoscopic diagnoses and planning laser treatment of retinal vascular disease.

Fluorescein angiography and fundus photography (CPT 92250) are normally performed together. Both tests are required to guide laser treatment.

Medically Necessary:

- Abnormal capillary permeability
- Age-related macular degeneration (ARMD)
- Chorioretinitis, choroid dystrophies and degeneration
- Diabetic retinopathy
- Macular edema
- Microaneurysms
- Neovascularization, including sub-retinal
- Retinal pigment epithelium defects
- Sudden vision loss
- Vascular obstructions

Approval Process:

- A. Non-clinical medical team approval authority for codes listed below:

CPT	
92235	FLUORESCEIN ANGIOGRAPHY (INCLUDES MULTIFRAME IMAGING) WITH INTERPRETATION AND REPORT, UNILATERAL OR BILATERAL
ICD-10	
A18.53	Tuberculous chorioretinitis
B39.4	Histoplasmosis capsulati, unspecified
B39.9	Histoplasmosis, unspecified
B58.01	Toxoplasma chorioretinitis
C69.20-C69.22	Malignant neoplasm of retina
V69.30-C69.32	Malignant neoplasm of choroid
D18.09	Hemangioma of other sites
D31.20-D31.22	Benign neoplasm of retina
D31.30-D31.32	Benign neoplasm of choroid
E08.311 - E08.3593	Diabetes mellitus due to underlying condition with diabetic retinopathy with/without macular edema
E08.37X1-E08.37X3	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment

E09.311-E09.3599	Drug or chemical induced diabetes mellitus with retinopathy
E09.37X1-E09.37X3	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment
E10.311 - E10.3593	Type 1 diabetes mellitus with unspecified diabetic retinopathy with/without macular edema
E10.37X1-E10.37X3	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment,
E11.311 - E11.3593	Type 2 diabetes mellitus with diabetic retinopathy with/without macular edema
E11.37X1-E11.37X3	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment
E13.311 - E13.3599	Other specified diabetes mellitus with diabetic retinopathy with /without macular edema
E13.37X1-E13.37X3	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment
G45.3	Amaurosis fugax
H15.031 - H15.033	Posterior scleritis
H20.821 - H20.823	Vogt-Koyanagi syndrome
H30.001 - H30.043	Focal chorioretinal inflammation
H30.101 - H30.143	Disseminated chorioretinal inflammation
H30.21 - H30.23	Posterior cyclitis
H30.811 - H30.813	Harada's disease
H30.891 - H30.893	Other chorioretinal inflammations
H30.91 - H30.93	Unspecified chorioretinal inflammation
H31.101 - H31.123	Choroidal degeneration/atrophy
H31.20 - H31.23	Hereditary choroidal dystrophy
H31.301 - H31.323	Choroidal hemorrhage/rupture
H31.401 - H31.423	Choroidal detachment
H33.21 - H33.23	Serous retinal detachment
H34.01 - H34.9	Retinal Artery/Vein Occlusion
H35.011-H35.073	Changes in retinal vascular appearance - Retinal telangiectasis
H35.111-H35.173	Retinopathy of prematurity
H35.20 - H35.23	Other non-diabetic proliferative retinopathy
H35.3110 - H35.3194	Nonexudative age-related macular degeneration
H35.3210 - H35.3293	Exudative age-related macular degeneration
H35.33	Angioid streaks of macula
H35.341 - H35.389	Macular cyst, hole, or pseudohole, - Toxic maculopathy
H35.451 - H35.459	Secondary pigmentary degeneration
H35.461 - H35.469	Secondary vitreoretinal degeneration
H35.50 - H35.54	Unspecified hereditary retinal dystrophy - Dystrophies primarily involving the retinal pigment epithelium
H35.60 - H35.63	Retinal hemorrhage
H35.70 - H35.739	Unspecified separation of retinal layers - Hemorrhagic detachment of retinal pigment epithelium, unspecified eye

H35.81 - H35.89	Retinal edema - Other specified retinal disorders
H35.9	Unspecified retinal disorder
H43.10 – H43.13	Vitreous hemorrhage
H44.001 - H44.009	Unspecified purulent endophthalmitis
H44.011 - H44.019	Panophthalmitis (acute)
H44.111 - H44.139	Panuveitis - Sympathetic uveitis
H44.20 - H44.23	Degenerative myopia
H44.30 - H44.329	Unspecified degenerative disorder of globe - Siderosis of eye
H44.641 - H44.649	Retained (old) magnetic foreign body in posterior wall of globe
H44.741 - H44.749	Retained (nonmagnetic) (old) foreign body in posterior wall of globe
H46.00 - H46.9	Optic papillitis - Unspecified optic neuritis
H47.011 - H47.099	Ischemic optic neuropathy - Other disorders of optic nerve, not elsewhere classified,
H47.10 - H47.149	Unspecified papilledema - Foster-Kennedy syndrome
H47.22	Hereditary optic atrophy
H47.311 - H47.399	Coloboma of optic disc - Other disorders of optic disc
H53.131 - H53.139	Sudden visual loss
H59.031 - H59.039	Cystoid macular edema following cataract surgery
R94.111	Abnormal electroretinogram [ERG]

B. Medical necessity for conditions not listed above require medical director determination

Coverage: Benefit coverage is specific to the member's benefit plan

Coding:

CPT	
92235	FLUORESCIN ANGIOGRAPHY (INCLUDES MULTIFRAME IMAGING) WITH INTERPRETATION AND REPORT
ICD-10	
D86.83	Sarcoid iridocyclitis
E10.36	Type 1 diabetes mellitus with diabetic cataract
E10.39	Type 1 diabetes mellitus with other diabetic ophthalmic complication
E11.36	Type 2 diabetes mellitus with diabetic cataract
E11.39	Type 2 diabetes mellitus with other diabetic ophthalmic complication
E13.36	Other specified diabetes mellitus with diabetic cataract
E13.39	Other specified diabetes mellitus with other diabetic ophthalmic complication
H16.241 - H16.249	Ophthalmia nodosa
H21.1X1 - H21.1X9	Other vascular disorders of iris and ciliary body
H21.331 - H21.339	Parasitic cyst of iris, ciliary body or anterior chamber
H30.001 - H30.049	Unspecified focal chorioretinal inflammation
H31.001 - H31.099	Unspecified chorioretinal scars

H32	Chorioretinal disorders in diseases classified elsewhere
H33.121 - H33.129	Parasitic cyst of retina
H43.20 - H43.23	Crystalline deposits in vitreous body

Summary of Revisions:

Date	Revision
11/16/2020	Updated nonclinical team diagnosis code list with H35.9 (unspecified retinal disorder)
10/21/2020	Updated nonclinical team diagnosis code list with Vitreous hemorrhage (H43.10 – H43.13) as it is a covered indication per LCD
09/09/2020	Updated scope – 92235 and 92250 are normally performed together
08/12/2020	Updated diagnoses and references
07/09/2018	Removed ICD-9s
08/07/2015	Added ICD-10s

References:

Center for Medicare and Medicaid Services (CMS), Regulations and Guidance; [Regulations & Guidance - Centers for Medicare & Medicaid Services, http://www.cms.gov/Regulations-and-Guidance/Regulations-and-Guidance.html](http://www.cms.gov/Regulations-and-Guidance/Regulations-and-Guidance.html); 08/01/2013

CMS National Coverage Determinations (NCDs); [National Coverage Determinations \(NCDs\) Alphabetical Index http://www.cms.gov/medicare-coverage-database/indexes/ncd-alphabetical-index.aspx](http://www.cms.gov/medicare-coverage-database/indexes/ncd-alphabetical-index.aspx); 08/01/2013

FIRST COAST SERVICE OPTIONS MAC - PART A/B LOCAL COVERAGE DETERMINATION - L33997 (Fluorescein Angiography), Effective 01/08/2019, Retired 04/24/2020

FIRST COAST SERVICE OPTIONS MAC - PART A/B LOCAL COVERAGE ARTICLE – A57714 (Fluorescein Angiography), effective 10/03/2018, Retired 04/24/2020

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