

Endothelial Cell Photography	Original Effective Date:	08/01/19
CPT 92286	Most Recent Review Date:	08/25/2023
	Latest Revision Date:	08/12/2020

<u>Scope</u>: Endothelial cell photography or Specular microscopy is done to determine the number of cells per square millimeter of corneal endothelium (back surface of cornea).

Endothelial cell photography is covered as medically necessary for the following clinical Indications:

- Slit lamp evidence of endothelial dystrophy(i.e. guttata) or corneal edema
- Slit lamp evidence of corneal dystrophies
- History of intraocular surgery and require cataract surgery
- The cornea is suspected to have endothelial abnormality

Per NCD 80.8, if the only visual problem or diagnosis is cataract, endothelial cell photography is considered part of the pre-surgical eye exam and not separately billable

Approval Process:

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

CPT/HCPCS 92286	Anterior segment imaging with interpretation and report; with specular microscopy and Endothelial cell analysis
ICD - 10	
H18.10 - H18.13	Bullous keratopathy, unspecified eye - Bullous keratopathy, bilateral
H18.20	Unspecified corneal edema
H18.221 - H18.239	Idiopathic corneal edema, right eye - Secondary corneal edema, unspecified eye
H18.451 - H18.459	Nodular corneal degeneration
H18.461 - H18.469	Peripheral corneal degeneration
H18.50	Unspecified hereditary corneal dystrophies
H18.51	Endothelial corneal dystrophy
H18.59	Other hereditary corneal dystrophies

• Medical necessity for conditions not listed above require Medical Director determination:

ICD-10

H27.00 - H27.03 Aphakia, unspecified eye - Aphakia, bilateral

Q12.3 Congenital aphakia

Z96.1 Presence of intraocular lens

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

Summary of Revisions:

Date	Revision
08/12/2020	Updated diagnoses and references

Reference:

National Coverage Determination (NCD) for Endothelial Cell Photography (80.8), Effective 08/31/1992

FIRST COAST SERVICE OPTIONS MAC - PART A/B LOCAL COVERAGE DETERMINATION - L33925 (Ophthalmological Diagnostic Services), Effective 01/08/2019, Retired 04/29/2020

FIRST COAST SERVICE OPTIONS MAC - PART A/B LOCAL COVERAGE ARTICLE — A57463 (Ophthalmological Diagnostic Services), Effective 10/03/2018, Retired 04/29/2020

Corneal Endothelial Photography, Three-year Revision; American Academy of Ophthalmology, September 1996