



ELECTRORETINOGRAPHY (ERG) CODING AND REIMBURSEMENT

Effective January 1, 2019, CPT code 92275 (electroretinography (ERG) with interpretation and report) was deleted and replaced with three new CPT codes: 92273 ffERG (full field ERG) – Flicker ERG for global cone function and Flash Plus Photopic Negative Response (PhNR) for neural and non-neuronal cell function; 92274 mfERG (multifocal ERG) for localized retinal dysfunction; and 0509T PERG (pattern ERG) for retinal ganglion cell function. Most Medicare Administrative Contractors (MACs) continue to cover 92273 and 92274 while coverage for 0509T is limited.

Electroretinography is used to evaluate function of the retina and optic nerve, including photoreceptors and ganglion cells. A number of ERG techniques are used which target different areas of the retina, including full field (flash and flicker) (92273) for global response of retina photoreceptors, multifocal (92274) for photoreceptors in multiple locations in the retina including the macula, and pattern (0509T) for retinal ganglion cells. All the ERG CPT codes include interpretation and report and therefore may not be reported separately. An example of a suggested full field ERG report is attached in Appendix A.

The difference between ffERG and mfERG is that ffERG records a summary response from the entire retina; mfERG uses multiple sequences to stimulate many retinal areas and records retinal responses from different regions simultaneously. Pattern electroretinography (PERG) exposes the retina to a specific pattern of stimuli in order to assess function of the retina and macula. Pattern ERG may be used as an adjunct to conventional full-field (ffERG) or multifocal ERG (mfERG) or used alone. PERG differs from ffERG and mfERG in that it uses a grating or checkerboard pattern in which the bright and bright regions are reversed instead of alternating flashes of light and dark.

Hospital Outpatient

CPT	Descriptor	SI	APC	Payment
92273	ERG with interpretation and report; full field (ie, ffERG, flash ERG, Ganzfeld ERG)	S	5722	\$253.10
92274	ERG with interpretation and report; multifocal (mfERG)	S	5721	\$138.35
0509T	ERG with interpretation and report, pattern (PERG)	S	5721	\$138.35

Physician

CPT	Descriptor	MPFS	
		Facility	Non-Facility
92273	ERG with interpretation and report; full field (ie, ffERG, flash ERG, Ganzfeld ERG)	\$37.89	\$132.81
92274	ERG with interpretation and report; multifocal (mfERG)	\$33.56	\$89.86
0509T	ERG with interpretation and report, pattern (PERG)	Contractor Priced	

Procedure coding should be based upon medical necessity and procedures and supplies provided to the patient. Coding and reimbursement information is provided for educational purposes and does not assure coverage of the specific item or service in a given case. LKC and The Pinnacle Health Group make no guarantee of coverage or reimbursement of fees. Contact your local Medicare Administrative Contractor (MAC) or CMS for specific information as payment rates listed are subject to change and will vary by payer and region. To the extent that you submit cost information to Medicare, Medicaid or any other reimbursement program to support claims for services or items, you are obligated to accurately report the actual price paid for such items, including any subsequent adjustments. CPT five-digit numeric codes, descriptions, and numeric modifiers only are Copyright AMA. All rights reserved.

Diagnosis Coding

There are 670 ICD-10-CM codes that may be associated with the CPT codes used to report ERG. The following list provides some of the more common ICD-10-CM diagnosis codes that may be used and is not intended to be all inclusive. The letter "X" indicates that a more specific descriptor may exist; providers should code to the highest specificity possible.

ICD-10-CM	Descriptor
E08.3X	Diabetes mellitus due to underlying condition with ophthalmic complications (e.g. diabetic retinopathy)
E09.3X	Drug or chemical induced diabetes mellitus with ophthalmic complications (e.g. diabetic retinopathy)
E10.3X	Type 1 diabetes mellitus with ophthalmic complications (e.g. diabetic retinopathy)
E11.3X	Type 2 diabetes mellitus with ophthalmic complications (e.g. diabetic retinopathy)
E13.3X	Other specified diabetes mellitus with ophthalmic complications (e.g. diabetic retinopathy)
E50.5*	Vitamin A deficiency with night blindness
F44.6	Conversion disorder with sensory symptom or deficit
H30.X	Chorioretinal inflammations
H31.X	Other disorders of choroid
H33.X	Retinal detachments and breaks
H34.X	Retinal vascular occlusions (e.g. CRVO, BRVO)
H35.1X	Retinopathy of prematurity
H35.3X	Degeneration of macula and posterior pole (e.g. Age-Related Macular Degeneration)
H35.4X	Peripheral retinal degeneration
H35.5X	Hereditary retinal dystrophy (e.g. Retinitis Pigmentosa)
H35.6X	Retinal hemorrhage
H35.7X	Separation of retinal layers (e.g. chorioretinopathy)
H35.8X	Other specified retinal disorders (i.e. retinal edema, ischemia, and other specified retinal disorders)
H44.2X	Degenerative myopia
H46.0X	Optic papillitis
H46.1X	Retrobulbar neuritis
H46.2	Nutritional optic neuropathy
H46.3	Toxic optic neuropathy
H46.8	Other optic neuritis
H46.9	Unspecified optic neuritis
H47.01X	Ischemic optic neuropathy
H47.02X	Hemorrhage in optic nerve sheath
H47.03X	Optic nerve hypoplasia
H47.09X	Other disorders of optic nerve, not elsewhere classified
H47.1X	Papilledema
H47.23X	Glaucomatous optic atrophy
H47.3XX	Other disorders of optic disc
H47.32X*	Drusen of the optic disc

ICD-10-CM	Descriptor
H53.1XX	Subjective visual disturbances
H53.41X	Scotoma involving central area
H53.45X	Other localized visual field defect
H53.5X*	Achromatopsia & color vision issues
H53.6X*	Night Blindness
H53.7X	Vision sensitivity deficiencies (i.e. glare sensitivity and impaired contrast sensitivity)
H53.8	Other visual disturbances
H53.9	Unspecified visual disturbances
H54.0XXX	Blindness, both eyes
H54.1XXX	Blindness, one eye, low vision other eye
H54.2XXX	Low vision, both eyes
H54.4XXX	Blindness, one eye
H54.5XXX	Low vision, one eye
H54.7*	Unspecified visual loss
R94.1XX	Abnormal results of function studies of peripheral nervous system and special senses
S04.011A – S04.012S	Injury of optic nerve
S05.51XA – S05.52XS	Injury of eye and orbit
Z79.899*	Other long term (current) drug therapy

**Coding software programs available such as RevenueCyclePro.com and Supercoder.com do not map the ERG codes to these ICD-10-CM codes. However, some MACs do list these as covered diagnoses codes when reported with 92273, 92274, or 0509T.*

Medicare Coverage ERG

MAC	LCD*	Coding & Billing Article**	Covered CPT Codes
CGS	No LCD for 92273 & 92284 L34370 Category III CPT Codes	No LCD for 92273 & 92284	92273 & 92274 are silent <i>0509T is non-covered</i>
FCSO	L37398 Electroretinography	A57677 Electroretinography	99273, 99274, and 0509T
NGS	L36831 Visual Electrophysiology Testing	A57060 Visual Electrophysiology Testing	99273, 99274, and 0509T
Noridian	No LCD	No Article	Silent
Novitas	No LCD	A56672 Electroretinography	99273, 99274, and 0509T
Palmetto	No LCD	No Article	N/A
WPS	No LCD	A57599 Visual Electrophysiology Testing	92273, 92274

**If there is No LCD, no written policy exists regarding ERGP and coverage is considered to be "silent." Coverage will be determined on a case-by-case basis and based on medical necessity.*

***Please click on the link to view a comprehensive list of ICD-10-CM codes that are covered.*

Frequently Asked Questions

Can 92273 (ffERG) be billed the same day as Optical Coherence Tomography (OCT)?

OCT can be reported with CPT 92133 or 92134: Scanning computerized ophthalmic diagnostic imaging, posterior segment, with interpretation and report, unilateral or bilateral; optic nerve or retina.

There are no CCI edits preventing 99273 from being reported on the same date of service as 92133 or 92134.

Can 92273 (ffERG) be billed the same day as a visual field test?

Visual field tests may be reported with one of three CPT codes:

- [92081](#): visual field examination, unilateral or bilateral, with interpretation and report; limited examination (e.g., tangent screen, or single stimulus level automated test);
- [92082](#): visual field examination, unilateral or bilateral, with interpretation and report; intermediate examination (e.g., at least 2 isopters on Goldmann, or automated suprathreshold);
or
- [92083](#): visual field examination, unilateral or bilateral, with interpretation and report; extended examination (e.g., Goldmann visual fields with at least 3 isopters plotted and static determination within the central 30°, or quantitative, automated threshold perimetry, Octopus program G-1, 32 or 42, Humphrey VF analyzer full threshold programs 30-2, 24-2, or 30/60-2).

There are no CCI edits preventing 99273 from being reported on the same date of service as 92081, 92082, or 92093.

Can 92273 be billed in patients with suspected glaucoma?

CPT 92273 can be reported with glaucomatous optic atrophies (H47.23X). However, CPT 92273 does not map to disorders of the optic disc (H47.39X) or other retinal disorders (H35.89). Please be sure to check your local payer coverage policies to determine specific coverage criteria.

Can 92273 be billed in patients who are diagnosed with glaucoma?

Coverage of CPT 92273 for patients diagnosed with glaucoma will vary by payer. For example, some local MACs and commercial payers provide coverage for patients diagnosed with glaucomatous optic atrophies (H47.23X) but not for disorders of the optic disc (H47.39X). Please be sure check your local payer coverage policies to determine specific coverage criteria.

Can 92273 be reported for a patient not yet diagnosed with Diabetes Mellitus?

Coverage of CPT 92273 for patients not yet diagnosed with Diabetes Mellitus will vary from payer to payer. For example, some local MAC and commercial payers will only allow CPT 92273 to be reported for patients with Diabetes Mellitus *and* some form of diabetic retinopathy. It should also be noted that some payers may cover patients that present with unspecified visual disturbances (H53.9) or unspecified visual loss (H54.7). Please be sure check your local payer coverage policies to determine specific coverage criteria.

Can 92273 be reported for a patient diagnosed with Diabetes Mellitus but not Diabetic Retinopathy?

Coverage of CPT 92273 for patients diagnosed with Diabetes Mellitus but not yet diagnosed with Diabetic Retinopathy will vary from payer to payer. For example, some local MACs and commercial payers will only allow CPT 92273 to be reported for patients with Diabetes Mellitus as well as some form of diabetic retinopathy (e.g. mild, moderate or severe nonproliferative Diabetic Retinopathy). It should also be noted that some payers may cover patients that present with unspecified visual disturbances (H53.9) or unspecified visual loss (H54.7). Please be sure check your local payer coverage policies to determine specific coverage criteria.

APPENDIX A: SUGGESTED FULL FIELD ELECTRORETINOGRAM REPORT

ID: _____

Patient Name: _____

Exam Date: _____

Gender: _____

DOB: _____

OD:

OS:

Flicker:

- 8 Td·s
- 16 Td·s
- 32 Td·s
- 85 Td·s (ISCEV Photopic Flicker)
- 3 cd·s/m²

B-wave Implicit Time

- Normal
- Borderline
- Abnormal

B-wave Implicit Time

- Normal
- Borderline
- Abnormal

B-wave Amplitude

- Normal
- Borderline
- Abnormal

B-wave Amplitude

- Normal
- Borderline
- Abnormal

Comment: _____

Comment: _____

PhNR:

- 38 Td·s Red / 380 Td·s Blue
- 1.0 cd·s/m² Red / 10.0 cd·s/m² Blue

B-wave Amplitude

- Normal
- Borderline
- Abnormal

B-wave Amplitude

- Normal
- Borderline
- Abnormal

P-Ratio (B-wave/(-P₇₂))

- Normal
- Borderline
- Abnormal

P-Ratio (B-wave/(-P₇₂))

- Normal
- Borderline
- Abnormal

Comment: _____

Comment: _____

Impression:

Plan:

References

1. All payment rates reflect the national average; actual payment rates will vary by geography.
2. CY 2020 Changes to Hospital Outpatient Prospective Payment and Ambulatory Payment Systems – Final Rule with Comment and Final CY2020 Payment Rates (CMS-1717-FC); CN Addendum B and CN ASC Addenda.
3. CY 2020 Revision to Payment Policies under the Physician's Fee Schedule and Other Revisions to Part B (CMS-1715-F); Addendum B. All MPFS Fee Schedules calculated using CF of \$36.0896 effective January 1, 2020
4. ICD-10-CM Expert for Physicians 2020, ©2019 Optum360, LLC. All rights reserved
5. ICD-10-PCS 2020, ©2019 Optum360, LLC. All rights reserved