

2021 IL Locality 12 Medicare Allowables

PROCEDURE CODE	EXPLANATION	MEDICARE ALLOWABLE	20%
65210	Conjunctival embedded foreign body (includes concretions)	\$39.71	7.94
65222	Corneal foreign body removal	\$68.04	13.61
65430	Scraping of cornea, diagnostic,for smear and/or culture	\$115.85	23.17
65435	Removal of corneal epithelium	\$81.92	16.38
65778	Amniotic Membrane	\$1,410.74	282.15
66984	Cataract removal with insertion of intraocular lens proth.	\$544.55	108.91
67820	Correction of trichiasis; epilation	\$21.20	4.24
68761	Closure of the lacrimal punctum	\$148.75	29.75
68801	Dilation of lacrimal punctum	\$94.29	18.86
76510	Ophthalmic ultrasound	\$71.93	14.39
76514	Corneal pachymetry	\$11.96	2.39
92002	Intermediate, new patient	\$85.29	17.06
92004	Comprehensive, new patient	\$148.58	29.72
92012	Intermediate, established patient	\$88.65	17.73
92014	Comprehensive, established patient	\$125.09	25.02
92020	Gonioscopy	\$27.62	5.52
92025	Corneal Topography	\$36.38	7.28
92060	Sensorimotor examination	\$62.38	12.48
92071	Fitting of Contact for treatment of ocular surface disease	\$36.91	7.38
92072	Fitting of contact for management if keratoconus	\$127.59	25.52
92082	Intermediate visual field	\$46.67	9.33
92083	Extended visual field	\$61.99	12.40
92100	Serial tonometry	\$83.25	16.65
92132	Anterior OCT, HRT, GDX	\$31.35	6.27
92133	Optic Nerve OCT, HRT, GDX	\$36.81	7.36
92134	Retina OCT, HRT	\$40.53	8.11
92201	Ophthalmoscopy, peripheral retina	\$24.98	5.00
92202	Ophthalmoscopy, optic nerve or macula	\$15.90	3.18
92250	Fundus photography	\$38.78	7.76
0509T	Pattern ERG	\$75.60	15.12
92273	Full Field ERG	\$128.04	25.61
92274	Multifocal ERG	\$87.20	17.44
92284	Dark adaptation eye exam	\$57.77	11.55
92285	External ocular photography	\$22.63	4.53
95930	Visual Evoked Potential	\$65.96	13.19
99202	Office visit, new patient	\$73.82	14.76
99203	Office visit, new patient	\$114.16	22.83
99204	Office visit, new patient	\$171.11	34.22
99205	Office visit, new patient	\$226.21	45.24
99211	Office visit, established patient	\$22.31	4.46
99212	Office visit, established patient	\$56.25	11.25
99213	Office visit, established patient	\$92.24	18.45
99214	Office visit, established patient	\$130.99	26.20
99215	Office visit, established patient	\$183.50	36.70