

ESSENTIAL MEDICAL EYE CARE SERVICES DURING COVID-19

RESOURCE GUIDE



Premier Academy360™

VSP® is temporarily expanding access to medical eye care services through the VSP Primary EyeCare PlanSM to all insured members and their covered dependents, who don't currently have the plan, through June 30, 2021. The VSP Primary EyeCare Plan provides supplemental medical eye care services for the detection, treatment, and management of ocular and visual conditions.

COVERED SERVICES

SERVICE	IN-OFFICE CPT CODES	TELEMEDICINE CPT CODES
Ophthalmological services: medical examinations	92002, 92004, 92012, 92014	N/A
Service(s) provided in the office at times other than regularly scheduled office hours	99050, 99051, 99058	N/A
Evaluation and management—office or other outpatient visit, new patient	99202-99205	99202-99205 Include modifier 95 or GQ as appropriate
Evaluation and management—office or other outpatient visit, established patient	99211-99215	99211-99215 Include modifier 95 or GQ as appropriate
Office consultation	99241-99245	N/A
Online digital evaluation and management (E/M) services (established patient, patient-initiated and billable once per patient per seven-day period)	N/A	99421, 99422, 99423
Interprofessional telephone/internet/electronic health record consultations (billable once per patient per seven-day period)	N/A	99446-99449, 99451
Interprofessional telephone/internet/electronic health record service(s) provided by a treating/requesting physician (billable once per patient per seven-day period)	N/A	99452

DID YOU KNOW?

Reimbursement for non-Medicaid eye exams will meet your current VSP Signature Plan® payable fees. Additional services are reimbursed at 80% of your Usual and Customary fee, up to the VSP Primary EyeCare Plan maximum allowables.

ADDITIONAL RESOURCES

For a complete list of covered services, please refer to the Provider Reference Manual on VSPOnline at eyefinity.com and navigate the **Plans and Coverage** area to access the **VSP Primary EyeCare Plan** page.