

SCREENING VISUAL ACUITY WITH E/M SERVICES

Policy # 31

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Review Date:

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Disclaimer:

1. Policies are subject to change without notice.
2. Policies outline coverage determinations for Select Health Commercial, Select Health Medicare (CMS), and Select Health Community Care (Medicaid) plans. Refer to the "Policy" section for more information.

Description

Visual acuity tests are used to evaluate eyesight. These tests measure the ability to see details at near and far distances. The test usually involves reading letters of different sizes on an eye chart (e.g., Snellen chart) 20 feet away from the patient.

Screening visual acuity tests may be performed by primary care providers and are typically done as part of a routine eye exam and/or preventive examination. It is done in age-appropriate individuals to screen for vision problems or by eye specialists as the focal reason for the patient's visit.

COMMERCIAL PLAN POLICY AND CHIP (CHILDREN'S HEALTH INSURANCE PROGRAM)

Select Health will not separately reimburse a screening test for visual acuity (99173) when done at the same time of a Medical Evaluation and Management service, a Preventive Medical service or routine eye examination.

A screening visual acuity test is done as part of an age-appropriate preventative medicine examination and therefore is included in the payment for the evaluation. When visual acuity is measured as part of a general ophthalmological service it is considered a component of the more extensive service. When done with a medical E/M service it is a diagnostic test rather than a screening and it is not appropriate to report with code 99173.

SELECT HEALTH MEDICARE (CMS)

Select Health Medicare considers CPT 99173 to be a non-covered service.

SELECT HEALTH COMMUNITY CARE (MEDICAID)

Select Health Community Care considers CPT 99173 to be a non-covered service.

Applicable Codes

CPT Codes	Descriptions
99173	Screening test of visual acuity, quantitative, bilateral

Sources

1. AAPC (N.D.) CPT® 99173, Under Other Medicine Service and Procedures. Retrieved July 22, 2025, from <https://www.aapc.com/codes/cpt-codes/99173>
2. Current Procedural Terminology (CPT®), (2024) – American Medical Association

3. Eye Health. What is Acuity of Vision? July 10, 2023. Retrieved July 7, 2025, from: <https://www.webmd.com/eye-health/what-is-acuity-of-vision> CMS.) (2024, November 1). Physician Fee Schedule. Retrieved July 18, 2025, from <https://www.cms.gov/medicare/payment/fee-schedules/physician/pfs-relative-value-files/rvu25c>
4. ICD-9-CM Coding Guidelines. (2024) Retrieved July 7, 2025, from https://www.encoderpro.com/epro/amaSecGuidelinesHandler.do?_k=101*99173&_a=view
5. Utah Department of Health and Human Services (n.d.). Coverage and Reimbursement Fee Schedule Download. Retrieved July 7, 2025, from <https://health.utah.gov/stplan/lookup/CoverageLookup.php>

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The codes for treatments and procedures applicable to this policy are included for informational purposes. Inclusion or exclusion of a procedure, diagnosis or device code(s) does not constitute or imply member coverage or provider reimbursement policy. Please refer to the member's contract benefits in effect at the time of service to determine coverage or non-coverage of these services as it applies to an individual member.

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