BUREAU OF DISABILITY ADJUDICATION

ATTACHMENT CC

MEDICAL

PHYSICAL EXAMS

OPHTHALMOLOGY/OPTOMETRY

Procedure Code	Description	Rate
92004	Ophthalmologic/Optometry Exam	$100.00
9200G	Ophthalmologic Exam w/fields - North	$225.00
12002	Ophthalmologic Exam - North	$100.00
12002	Ophthalmologic Exam - South	$100.00
19208	Visual Fields - South	$65.00
N/A	Interpretation fee	$25.00