

Table 1: CPT code for dark adaptation\*

Code	Description
92284	Dark adaptation examination with interpretation and report

\*The 2018 national average CMS reimbursement is \$64.08.

CPT 92284 is considered, per AMA/CPT and CMS guidelines, to be an inherently unilateral/bilateral code that can be reported once per session when performed in one eye or both eyes, with the use of code modifiers for laterality.

Table 2: ICD-10-CM diagnosis codes supporting dark adaptation†

Code	Description
E50.5	Vitamin A deficiency with night blindness
H35.30	Unspecified macular degeneration
H35.31xx	Nonexudative age-related macular degeneration
H35.32xx	Exudative age-related macular degeneration
H35.361	Drusen (degenerative) of macula, right eye
H35.362	Drusen (degenerative) of macula, left eye
H35.363	Drusen (degenerative) of macula, bilateral
H35.369	Drusen (degenerative) of macula, unspecified eye
H35.50	Unspecified hereditary retinal dystrophy
H35.52	Pigmentary retinal dystrophy
H35.53	Other dystrophies primarily involving the sensory retina
H35.54	Dystrophies primarily involving the retinal pigment epithelium
H53.60	Unspecified night blindness
H53.61	Abnormal dark adaptation curve
H53.62	Acquired night blindness
H53.63	Congenital night blindness
H53.69	Other night blindness

†First Coast LCD 33925 limits reimbursement in Florida, Puerto Rico and the Virgin Islands to E50.5, H35.50, H35.52, H35.53, H35.54, H53.60, H53.61, H53.63 and H53.69

The diagnosis codes listed here are applicable to dark adaptation testing. The list is not intended to be exhaustive. Conversely, all Medicare, Medicaid, and private insurers may not cover all of the conditions listed. Providers should check with specific insurers to determine if there are any limitations or special instructions for claim submission.