

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR**

ACTION REFERRAL

TO <i>Myers / FOIA</i>	DATE <i>3-25-09</i>
---------------------------	------------------------

DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER <i>101529</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>Cc: Ms. For Kuner, Singleton, Stensland</i> <i>Cleveland 4/1/09, letter attached</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input checked="" type="checkbox"/> FOIA DATE DUE <i>4-8-09</i> <input type="checkbox"/> Necessary Action

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.			
2.			
3.			
4.			



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

Emma Forkner
Director

TO:

FROM:

SUBJECT: Cost of Processing FOIA Request #

The South Carolina Department of Health and Human Services has received and processed your FOIA request. The cost for processing this information is as follows:

Staff processing time at \$10.00 per hour	_____ Hours	\$_____
Pages copied at \$.10 per page	_____ Pages	\$_____
Pages faxed at \$.20 per page	_____ Pages	\$_____
Shipping and Handling Costs		\$_____
Other costs associated with the FOIA request:	_____	\$_____

Total Amount Due SCDHHS: \$_____

Please remit the above amount to the following address:

Bureau of Fiscal Affairs
South Carolina Department of Health and Human Services
Post Office Box 8297
Columbia, South Carolina 29202-8297

Please contact _____ should you have any questions.

Signature _____ Date: _____



State of South Carolina
Department of Health and Human Services

Mark Sanford
Governor

April 1, 2009

Emma Forkner
Director

Mr. Richard F. Davis
Capitol Consultants, Inc.
Post Office Box 1763
Columbia, South Carolina 29202

Richard
Dear Mr. Davis:

Thank you for the Freedom of Information Act (FOIA) request regarding the South Carolina Department of Health and Human Services (SCDHHS) Optometry and Ophthalmology program. An Excel spreadsheet containing the requested information is enclosed.

If you have questions regarding this information, please contact Ms. Valeria Williams, Division Director for Physician Services, at (803) 898-2660.

Sincerely,

Handwritten signature of Felicity Myers.

Felicity Myers, Ph.D.
Deputy Director

FM/gws

Richard,
Bryan indicated

you were particularly
interested in a few codes.

I highlighted those codes
for your convenience. I also
provided you with duplicate
clean copies of those pages. What's

Log #524

optometry vs ophthalmology by proc code

Subset	All Data				
Time Period	FY 2008				
Record Type Code 1					
		Physician Individual		Optometrist Individual	
		OPHTHALMOLOG		OPTOMETRY	
Procedure Code	Procedure	Patients	Units Fac and Prof	Patients	Units Fac and Prof
00103	ANESTH FOR RECONSTRUCTIVE EYEL	7	291	0	0
00140	ANES PROCS ON EYE NOS	46	1,501	0	0
00142	ANES LENS SURGERY	15	514	0	0
00144	ANES CORNEAL TRANSPLANT	2	198	0	0
00145	ANES/PROC ON EYE VITREORENTINA	3	433	0	0
10060	INCIS&DRAIN ABCCESS/CYST, SIMPL	14	15	0	0
10140	I&D HEMATOMA, SEROMA OR FLUID	1	1	0	0
11100	BIOPSY SKN SQ TSSUE MUCOS MEMB	1	1	0	0
11200	REMOV SKN TAGS MULT FIBROCU1	5	6	0	0
11310	SHV EPD/DRM LESION SGL F/E/E/N	1	3	0	0
11311	SHV EPD/DRM LESN SGL F/E/E/N/L	1	1	0	0
11400	EXC BENGN LES INCL MARG,T-A-L,	1	1	0	0
11423	EXC BENGN LES INCL MARG H-F-NK	2	2	0	0
11426	EXC BENGN LES INCL MARG H-F-NK	2	2	0	0
11440	EXC BEGN LES INCL MARG FACE 0.	35	37	0	0
11441	EXC BEGN LES INCL MARG FACE 0.	19	22	0	0
11442	EXC BEGN LES INCL MARG FACE 1.	10	13	0	0
11443	EXC BEGN LES INCL MARG FACE 2.	2	2	0	0
11444	EXC BEGN LES INCL MARG FACE 3.	3	3	0	0
11640	EXCISE,MALIG LESION INCL MARG,	2	2	0	0
11641	EXCISE,MALG LESION INCL MARG,	1	1	0	0
11643	EXCISE,MALG LESION INCL MARG,	1	1	0	0
11900	INJECT INTRALESIONAL UP TO 7 L	4	4	0	0
12011	SIMPLE REPAIR (AREA) 2.5 OR LE	4	4	0	0
12014	SIMPLE REPAIR (AREA) 5.1 TO 7.	1	1	0	0
12020	TREATMENT SUPERFICIAL WOUND DE	2	2	0	0
12051	LAYER CLOSURE (AREA) 2.5 CM OR	2	2	0	0
12052	LAYER CLOSURE(AREA) 2.6 CM TO	2	2	0	0
12054	LAYER CLOS (AREA) 7.6 CM TO 12	1	1	0	0
13131	REPAIR COMPLEX (AREA) 1.1 TO 2	1	1	0	0
13151	REPAIR COMPLEX LID-NOS-EAR-LIP	3	3	0	0
13152	REPAIR COMPLX LID-NOS-EAR-LIP	1	1	0	0
13160	SECONDARY CLOS SURGI WOUND, DE	1	1	0	0
14060	ADJ TSSUE TRANS-REAR(AREA)10	3	3	0	0
15000	SURG PREP/CREAT RECIP SITE-EXC	1	1	0	0
15002	SURG PREP-EXC WOUND,TRK/ARM/LE	2	2	0	0
15120	SPLIT GRAFT(AREA)100SQ CM LESS	1	1	0	0
15260	FULL THCKNSS GF NOSE ETC -20SQ	6	6	0	0
15335	ACELL DERM ALLOGR.1ST 100 SQ C	1	2	0	0
15576	FORM DIR-TUBED PED EYELID NOSE	1	1	0	0
15630	INTERMED DELAY ANY FLAP NOSE E	1	1	0	0

optometry vs opthamology by proc code

15731	FOREHEAD FLAP W/FASCULAR PEDIC	1	1	1	0	0	0
15732	MUSCL,MYO/FASCIOCUTANEOUS FLAP	3	4	0	0	0	0
15823	BLEPHAROPLASTY,UP LID SKIN WT	25	44	0	0	0	0
17000	DESTROY BENIGN/PREALIGNANT LE	2	3	0	0	0	0
17003	SEE 17000 2-14LES(LST SEP&INC	2	3	0	0	0	0
17282	DEST MAL LES 1.1 2CM FA EA EYE	1	1	0	0	0	0
20670	REMOVAL IMPLAN SUPER(EG WIRE,P	2	2	0	0	0	0
20912	CARTILAGE GRAFT NASAL SEPTUM	1	1	0	0	0	0
21030	EXCISION BENIGN TUM-CYST FACI	1	1	0	0	0	0
21282	LATERAL CANTHOPEXY	2	3	0	0	0	0
21320	MANIP INSTRUMENTAL COMP,ICAT N	5	5	0	0	0	0
21390	OPN TREAT ORBIT(BLOWOUT) FX AL	2	3	0	0	0	0
21453	CLOS TRT MANDIBULAR FX W INTER	2	2	0	0	0	0
21501	INCISION DRAINAGE DEEP ABCESS	1	1	0	0	0	0
21555	EXCIS TUMOR SOFT TISS NECK-THO	1	1	0	0	0	0
30117	EXCS/DESTR,INTRANASL LESN,INTR	3	3	0	0	0	0
30130	EXCISION TURBINATE PARTIAL OR	2	4	0	0	0	0
30140	SUBMUCOUS RESECT TURBIN,PART-C	11	21	0	0	0	0
30300	REMOVAL FOREIGN BODY INTRANASA	2	2	0	0	0	0
30310	REMOVAL FOREIGN BODY	2	2	0	0	0	0
30520	SEPTOPLAS/SUBMUCO RESECT W/WO	10	10	0	0	0	0
30600	REPAIR FISTULA ORONASAL	1	1	0	0	0	0
30802	CAUT MUCOSA TUR BILAT INTRAMUR	5	5	0	0	0	0
30901	CONTROL NASAL HEMOR ANTER SIM	27	33	0	0	0	0
30903	CONTROL NASAL HEMOR ANT COMPLX	20	33	0	0	0	0
30930	FRACT NASAL TURBINATE(S) THERA	2	2	0	0	0	0
31030	SINUSOTOMY RADICAL W/O REMOVAL	1	1	0	0	0	0
31231	NASAL ENDOSCOPY DIAG UNIL/BIL	10	10	0	0	0	0
31237	NAS/SINUS ENDOSC SURG W/BIOP P	2	3	0	0	0	0
31238	NAS/SINUS ENDOSC,SURG,W/CONTR	1	1	0	0	0	0
31254	NASAL ENDOSCOPY SURG W ETHMOI	3	3	0	0	0	0
31255	NASAL ENDOSCOPY W ETHMOIDECT A	3	5	0	0	0	0
31256	NASAL ENDOSCOPY SURGICAL W MAX	7	10	0	0	0	0
31267	MAXIL SINUS ENDOSCOP SURG REM	2	2	0	0	0	0
31502	TRACHE TUBE CHANGE BEFOR ESTAB	1	1	0	0	0	0
31525	LARYNGOSCOPY DIAGNOSTIC EXCEPT	3	3	0	0	0	0
31535	LARYNGOSCOPY DIRECT OP W BIOPS	1	1	0	0	0	0
31536	LARYNGOSCOPY DIR OPERAT W BIOP	1	1	0	0	0	0
31540	LARYNGOSCOPY OP W EXCIS TUMOR	1	1	0	0	0	0
31575	LARYNGOSCOPY FLEXI FIBERSCOPI	29	32	0	0	0	0
31613	TRACHEOSTOMA REVISION-SIMP W/O	1	1	0	0	0	0
36415	COLLECTION OF VENOUS BLOOD/VEN	1	1	0	0	0	0
37609	LIGATION BIOPSY TEMPORAL ARTER	11	11	0	0	0	0
38300	DRG LYMPH NODE ABSCESS LYMPHAD	1	1	0	0	0	0
38505	BIOP OR EXCIS LYMPH NODE NEEDL	1	1	0	0	0	0
38510	BIO/EXCI LYMP NODE DP CERV NOD	5	5	0	0	0	0
38720	CERVICAL LYMPHADENECTOMY COMPL	1	1	0	0	0	0
40810	EXCIS LESION MUCOSA SUBMUCOS C	1	1	0	0	0	0
40812	MOUTH EXCISION MUCOSASUB MUC	1	1	0	0	0	0
40819	EXCISION FRENUM LIBIAL OR BUCC	1	1	0	0	0	0

optometry vs ophthalmology by proc code

41010	INCISION LINGUAL FRENUM (FRENO	4	4	4	0	0
41100	BIOPSY TONGUE ANT TWO THIRDS	1	3	0	0	0
41110	EXCIS LESION TONGUE W OUT CLOS	1	1	0	0	0
41112	EXCIS LESION TONGUE W CLOSURE	3	3	0	0	0
41115	EXCISION LINGUAL FRENUM	4	4	0	0	0
42000	DRG ABSCESS PALATE UVULA	1	1	0	0	0
42145	PALATOPHARYGOPLASTY(EG UVULOPA	2	2	0	0	0
42810	EXCIS BRANCH CLEFT SYST/VEST S	1	1	0	0	0
42962	CONT ORO PHARY HEMORR WITH SEC	5	5	0	0	0
43200	ESOPHAGOSCOPY, RIGID OR FLEXIB	2	2	0	0	0
43235	UPPER GI ENDOSCOPY W/MO SPECIME	1	1	0	0	0
43239	UP GI ENDOSCOPY FOR BI & OR CO	2	2	0	0	0
45380	COLONOSCOPY, FLEX, W/BIOP, SIN	1	1	0	0	0
45384	COLON FLEX W/REMOVAL OF TUMOR,	1	1	0	0	0
45385	COLONOSCOPY, FLEX, W/REMOVAL T	1	1	0	0	0
60240	THYROIDECT TOTAL OR COMPLETE	2	2	0	0	0
60500	PARATHYROIDECT OR EXPLOR PARAT	1	1	0	0	0
64612	CHEMODENERVATION/MUSC;INNERVAT	26	82	0	0	0
64613	DECHEMODENERVATION OF NECK MUS	2	7	0	0	0
65093	EVISCERATION OCULAR CONT W/ IM	6	6	0	0	0
65103	ENUCLEATION EYE W/IMPLANT MUSCL	2	2	0	0	0
65105	ENUCLEA EYE W/IMPLAN MUSCLE AT	19	19	0	0	0
65125	MOD OCULAR IMPLANT W PLAC/REPL	1	1	0	0	0
65155	REINSER OCUL IMPL W/USE FOREI	1	1	0	0	0
65205	REMOV FB EXTERN EYE CONJUNCT S	31	31	66	67	0
65210	REMOV FB EXTER EYE CONJUN EMBE	30	31	20	20	0
65220	REMOV FB EXT EYE CORNEAL W/O S	4	4	2	2	0
65222	REMOV FB EXT EYE W/SLIT LAMP C	101	103	51	53	0
65235	REMOV FB, INTRACULR, ANTERIOR CHAM	1	1	0	0	0
65260	REMOV FB INTRAOCU POST SEG MAG	2	2	0	0	0
65265	REMOV FB INTRAOCU POST SEGMENT	1	1	0	0	0
65270	REPAIR LAC CONJ W/MO NONPERFO	1	1	0	0	0
65280	REPLAC CORNEA AND/OR SCLERA P	6	6	0	0	0
65285	REPLAC CORNEA AND/OR SCLERA P	14	15	0	0	0
65286	REPAIR LACER APPLICAT GLUE COR	2	2	0	0	0
65290	REPAIR WOUND EXTRAOCUL MUS, TEN	1	2	0	0	0
65400	EXCISION LESION CORNEA EXCEPT	9	10	0	0	0
65420	EXCIS/TRANSPPOSITION PTERYGIUM	8	9	0	0	0
65426	EXCIS/TRANSPPOSITION PTERYGIUM	12	13	0	0	0
65430	SCRAP CORNEA DIAGNOS SMEAR AND	7	6	0	0	0
65435	REMOV CORNEA EPITHEL W/MO CHEM	12	13	6	7	0
65436	REMOV CORREAL EPITHEL W/APPLIC	3	4	0	0	0
65730	KERATOPLAS(COR TRANS)PENETRAT(24	25	0	0	0
65750	KERATOPLAS(COR TRANS)PENETRAT(1	1	0	0	0
65755	KERATOPLAS(CORNE TRANS)PENETRA	23	24	0	0	0
65772	CORNEAL RELAXING INCIS CORRECT	3	3	0	0	0
65775	CORNEAL WEDGE RESECT SURG INDU	1	1	0	0	0
65780	OCULAR RECONST, AMNIOTIC MEMBRA	6	6	0	0	0
66800	PARACENT ANTER CHAMBEYE(SEP PR	1	1	0	0	0
66805	PARACENT ANTER EYE(SEP PRO)W/T	4	5	0	0	0

optometry vs ophthalmology by proc code

65810	PARACEN ANTE EYE(SEP PRO)W/REM	1	1	1	0	0
65815	PARACEN ANTE EYE(SEP PRO)W/REM	4	4	0	0	0
65850	TRABECULOTOMY AB EXTERNO	6	9	0	0	0
65855	TRABECULOPLASTY LASER ONEMORE	162	222	0	0	0
65860	SEVERING ADHESIONS ANT SEGMENT	1	1	0	0	0
65865	SEVERING ADHESIONS ANT EYE INC	7	7	0	0	0
65875	SEVER ADHES ANTE SEQ EYE POST	5	5	0	0	0
65880	SEVER ADHES ANTE SEQ EYE CORNE	1	1	0	0	0
65920	REMOV PLANT MATERL,ANTERIOR SE	7	7	0	0	0
65930	REMOVE BLOOD CLOT,ANTERIOR SEG	3	3	0	0	0
66020	INJ,ANTERIOR CHAMBR EYE,(SEP P	1	1	0	0	0
66130	EXCISION LESION SCLERA	3	3	0	0	0
66170	FISTULI SCLER GLAUCA TRABECULE	54	58	0	0	0
66172	FISTULI SCLER GLAUCA TRAB AB E	13	14	0	0	0
66180	AQUEOUS SHUNT EXTRAOCULAR RES	40	38	0	0	0
66185	REVISION,AQUEOUS SHUNT TO EXTR	5	5	0	0	0
66225	REPAIR SCLERAL STAPHYLOMA WITH	1	1	0	0	0
66250	REVISION/REPAIR OP WOUND ANTE	18	17	0	0	0
66500	TRIDOTOMY STAB INCIS(SEP PRO)	1	1	0	0	0
66505	IRIDOT STAB INCIS(SEP PRO)W/TR	1	1	0	0	0
66625	IRIDEC W/CORNEOSCL/SECT PERIP	2	2	0	0	0
66635	IRIDEC W/CORNEOSCL/SECT (OPTIC	1	1	0	0	0
66682	SUTURE IRIS CILIARY BOD(MCCAN	5	5	0	0	0
66700	CILIARY BODY DESTRUCTION, DIAT	1	1	0	0	0
66710	CILIARY BODY DEST CYCLOPHOTOCC	22	26	0	0	0
66711	CILIARY BODY DEST,RYCLEPHOTOC	10	12	0	0	0
66761	IRIDOTOMY/IRIDECTOMYLASER SUR/	53	81	0	0	0
66762	COREOPLASTY(IRIDOTOMY) COOAGUL	3	3	0	0	0
66820	DISCIS 2ND MEMB CATAR(OPAC POS	1	1	0	0	0
66821	DISCIS 2ND CATARCT LASER(YAG)	413	482	7	7	7
66825	REPOSITION INTRAOC LENS PROSTH	5	5	0	0	0
66830	REMOV 2ND MEMB CATAR W CORNEO-	4	2	0	0	0
66840	REM LENS MAT ASPIR TECH ONE OR	2	2	0	0	0
66850	REM LENS MAT PHACOFRAG TECH W/	21	22	0	0	0
66852	CATARACT REMOVAL PARS PLANA AP	8	8	0	0	0
66920	REMOVE LENS MATERIAL,INTRACAPS	2	2	0	0	0
66940	EXTRACT LENS EXTRACAPS;NOT OTH	6	6	0	0	0
66982	EXTRACAPSULAR CATARACT REMOVAL	265	303	0	0	0
66983	INTRACAP CATARACT EXTRA INSERT	2	2	0	0	0
66984	CATARACT SURG W/LENS INSERTION	2,214	3,023	100	126	
66985	INSERT INTRAOC LENS PRO NOT W	14	15	0	0	0
66986	EXCHANGE OF INTRAOCULAR LENS	9	9	0	0	0
67005	REM VITRE ANTE APPRO(OPN SKYL	1	1	0	0	0
67010	REMOV VIT ANT SUBTOTAL W MECHA	8	9	0	0	0
67015	ASPIR/RELEA VITRE SUBRET/CHORO	2	2	0	0	0
67025	INJECT VIT SUBSTI PARS PLANAL	4	4	0	0	0
67027	IMPL/REPL INTRAVIT DRUG DEL SY	2	2	0	0	0
67028	INTRAVITREAL INJECT,PHARMACOLO	323	562	0	0	0
67031	SEVER VITRE STRANDS-FAC ADHES	2	2	0	0	0
67036	VITRECTOMY MECHANICAL PARS PLA	48	51	0	0	0

optometry vs opthamology by proc code

67038	VITERECTOMY MECHAN W MEMBRANE	126	134	0	0
67039	VITRECTOMY W FOCAL ENDOLASER	3	3	0	0
67040	VITERECTOMY MECHAN W ENDOLASER	122	128	0	0
67041	VITRECTOMY, PARS PLANTA AP, MACU	24	25	0	0
67042	VITRECTOMY, PARS PLANTA APPR, MA	12	13	0	0
67043	VITRECTOMY, PARS PLANTA AP, CHOR	1	1	0	0
67105	REPAIR RET DETACH 1 OR + PHOTO	10	10	0	0
67107	REP RETINAL DET SCLERAL BUCK W	8	8	0	0
67108	REP RET DETACH W VITREC W/MO A	70	81	0	0
67110	REPAIR RETINAL DETACH, AIR/GAS	1	1	0	0
67112	REP RET DETACH SCLERAL BUCK/VI	2	2	0	0
67113	REPAIR RETINAL DETACHMENT, COMP	15	16	0	0
67120	REMOVAL IMPLANTED MATERIAL POS	1	1	0	0
67121	REMOV IMPLANT MATERIAL POST SE	9	10	0	0
67141	PROPHY RET DET WO DRAIN/1 OR M	1	1	0	0
67145	PROPHY RET DET WO DRAIN/1 OR M	32	34	0	0
67208	DESTRUCT LESION RET(1 OR MOR)C	2	2	0	0
67210	DESTRUCT LESION/1 OR MOR/PHOTO	410	569	0	0
67220	DESTR LOC LESION OF CHOROID, 1	9	10	0	0
67221	DESTR LOC LESION/CHORD;PHOTODY	4	5	0	0
67227	DESTRUCT EXTEN/PROGRES RETINOP	5	7	0	0
67228	DESTRUCT EXTEN/PROGRES RETINOP	379	565	0	0
67229	TX EXTN/PROGR RETINOPATHY, PRET	11	17	0	0
67250	SCLERAL REINFORCE(SEP PRO) W/O	1	1	0	0
67255	SCLERAL REINFORC(SEP PRO) W/GR	37	34	0	0
67311	STRABIS SURG, RECES/RESECT PROC	162	277	0	0
67312	STRABIS SURG(NO PREV SURG)2 HO	31	37	0	0
67314	STRADISMUS SURG, RECESS/RESECT,	37	50	0	0
67316	STRABISMUS SURG, RECESS/RESECT	2	2	0	0
67318	STRABISMUS SURG, ANY PROCED, SUP	9	12	0	0
67320	TRANSPO PROCED, ANY EXTRAOCULA	6	6	0	0
67331	STRABIS SURG PT PREV OP/INJ NO	2	2	0	0
67332	STRABIS SURG PREV SCAR OR REST	24	27	0	0
67335	ADJUSTABLE SUTURE TECH DURING	2	2	0	0
67340	STRABISMUS SURG, EXPLOR/REPR DE	2	2	0	0
67345	CHEMODENERVATION EXTRAOCULAR N	1	1	0	0
67400	ORBITOTOMY W/O BF EXPLO W/MO B	3	3	0	0
67412	ORBITOTOMY W/O BONE FLAP(FRONT	3	3	0	0
67413	ORBITOTOMY W/O BONE FLAP(FRON)	2	2	0	0
67414	ORBITOTOMY WITHOUT BONE FLAP R	3	3	0	0
67500	RETRBULBAR INJ MEDICATION (SEP	3	4	0	0
67505	RETROBULBAR INJ ALCOHOL	2	2	0	0
67515	INJ MEDICA/OTHER SUBSTAN IN TE	55	72	0	0
67560	ORBIT(IMPLA OUT MUS CON) REMOV	1	1	0	0
67700	BLEPHAROTOMY DRAINAGE ABCESS E	21	24	0	0
67710	SEVERING TARSORRHAPHY	2	2	0	0
67800	EXCISION CHALAZION SINGLE	115	121	0	0
67801	EXCISION CHALAZION MULTIPLE SA	14	18	0	0
67805	EXCISION CHALAZION MULTIPLE DI	9	12	0	0
67808	EXCISION CHALAZION ANESTH AN/O	31	38	0	0

optometry vs ophthalmology by proc code

67810	BIOPSY EYELID	10	10	0	0
67820	CORRECT TRICHIASIS EPILAT FORC	141	218	155	214
67825	CORRECT TRICHIASIS EPIL O/THAN	11	14	0	0
67840	EXCIS LESIO EYELID W/O CLOS W/	70	77	0	0
67850	DESTRUCT LESION LID MARGIN (UP	1	1	0	0
67875	TEMP CLOSURE EYELIDS BY SUTURE	15	16	0	0
67880	CONSTRUCT INTER ADHESION MEDIA	10	12	0	0
67900	REPAIR BROW PTOSIS	3	5	0	0
67901	REPAIR BLEPHAR FRONT W/MUS SUT	7	9	0	0
67902	REPAIR BLEPHAR FRONT MUS W/FAC	11	13	0	0
67904	REPAI BLEPHARO(TARSO)LEVATOR R	30	44	0	0
67908	CONJUNC-TARSO-MULLER-MUS-LEV R	2	4	0	0
67909	REDUCT OF OVERCORE OF PTOSIS	1	1	0	0
67911	CORRECTION LID RETRACTION	4	5	0	0
67912	CX LAGOPHTHALMOS,UP EYELID LID	3	4	0	0
67914	REPAIR ECTROPION SUTURE	1	1	0	0
67915	REPAIR ECTROPION THE RMOCAUTER	1	2	0	0
67916	REPAIR ECTROPION BLEPHAROP EXC	1	1	0	0
67917	BLEPHAROPLASTY EXTENSIVE	23	31	0	0
67921	REPAIR ENTROPION SUTURE	11	12	0	0
67923	REPAIR ENTROP BLEPHAROP EXTENS	5	5	0	0
67924	REPAIR ENTROPION SUT BLEPHARO	8	10	0	0
67930	SUT RECENT WOUND EYELID INVOLL	1	1	0	0
67935	SUT RECENT WOUND EYELID LID,TAR	7	8	0	0
67938	REMOV EMBEDDED FB EYELID SEE O	0	0	1	1
67950	CANTHOPLASTY	3	4	0	0
67961	EXCIS/REPAIR EYELID FULL THICK	8	8	0	0
67975	RECON EYE FUL THICK BY TRANS S	1	1	0	0
67999	UNLISTED PROCEED EYELIDS	2	2	0	0
68020	INCIS CONJUNCT DRAINAGE CYST	0	0	2	2
68100	BIOPSY CONJUNCTIVA	4	4	0	0
68110	EXCISION LESION CONJUNCTIVA U	5	5	0	0
68115	EXCISION LESION CONJUNCTIVA O	4	4	0	0
68130	EXCISION LESION CONJUNCTIVA W	1	1	0	0
68200	SUBCONJUNCTIVAL INJECTION	17	35	0	0
68320	CONJUNCTIVOP W/CONJUNCT GRAF O	1	1	0	0
68326	CONJUNTI RECON CUL-DE-SAC W/GR	3	4	0	0
68335	REPAIR SYMBLEPHARON W/GRAF CON	1	1	0	0
68340	REPAIR SYMBLEPHARON DIVIS W/WO	3	5	0	0
68362	CONJUNCT FLAP TOTAL (EG GUNDER	1	1	0	0
68420	INCISION DRAIN LACRIMAL SAC (D	1	1	0	0
68440	SNIP INCISION LACRIMAL PUNCTUM	4	6	0	0
68525	BIOPSY LACRIMAL SAC	1	1	0	0
68700	PLASTIC REPAIR CANALICULI	6	6	0	0
68720	DACRYOCYSTORHINOSTOMY(FISTUL	11	13	0	0
68750	CONJUNCTIVORHINOSTOMY W/INSERT	2	2	0	0
68760	CLOSURE LACRIMAL PUNCTUM (THER	5	7	0	0
68761	CLOSURE OF THE LACRIMAL PUNCTU	82	151	77	308
68801	DILATION LACRIMAL PUNCTUM,W W/	21	27	26	139
68810	PROBING NASOLACRIMAL DUCT,W W/	20	21	0	0

optometry vs ophthalmology by proc code

68811	PROBING NASOLACRIM DUCT,REQ GE	74	90	0	0
68815	PROBING NASOLACRIM DUCT,INSRT	31	35	0	0
68816	PROB NASOLACRIMAL DUCT,BALLOON	3	5	0	0
68840	PROB LACRIM CANALICULI W/MO IR	21	29	2	2
69000	DRAINAGE EXTERNAL EAR ABCESS H	3	3	0	0
69110	EXCISION EXTERN EAR PART/SIMPL	1	1	0	0
69200	REMOV FB EX AUD CANAL W/O GEN	13	14	0	0
69205	REM FB EX AUDIT CAN W/GEN ANES	2	2	0	0
69210	REM IMPACT CERUMEN(SEP PROCED)	18	19	0	0
69220	DEBRIDE MASTOID CAVITY SIMPLE	4	4	0	0
69421	MYRINGOTOMY INC ASPIR-INFLAT G	7	12	0	0
69424	REMOVE VENTILATING TUBE	1	1	0	0
69433	TYMPANOSTOMY(TUBE)LOCAL/TOP AN	6	6	0	0
69436	TYMPANOSTOMY(TUBE)GEN ANESTHES	249	495	0	0
69610	TYMPANIC MEMB REPAIR W/MO PREP	6	7	0	0
69620	MYRINGOPLASTY (SURG CONFIN TO	2	2	0	0
69631	TYMPANOPLASTY W/O MASTOIDECTOM	12	12	0	0
69643	TYMPANOPLASTY W/MASTOID W/INTA	2	2	0	0
70100	RADIO EXAM MANDIBLE PART LESS	1	1	0	0
70210	RADIO EXAM SINUSES PARAN LESS	7	7	0	0
70360	RADIO EXAM NECK SOFT TISSUE	2	2	0	0
70480	CT ORBIT/EAR/FOSSA;W/O CONTRAS	5	8	0	0
70486	CT, MAXILLOFACIAL;W/O CONTRAST	36	36	0	0
74514	Unknown Proc Cd 74514	0	0	1	1
76510	OPHTHALMIC U-SND,DIAG;B-SCANS	3	4	0	0
76511	OPHTHAL ULTRPSO ECHO A-MODE AM	1	2	0	0
76512	OPHTHAL ULTRASO ECHO CONTRACT	335	475	2	2
76513	OPHTHAL ULTRA,ECHO,DIAG;ANT SE	1	1	0	0
76514	OPHTHALMIC,ECHOGGRAPH,DIAG;(COR	732	755	792	907
76516	OPHTHALMIC BIOMETRY ULTRA ECHO	6	9	1	1
76517	ECOGRAPHY OPHTHALMIC B-SCAN	1	1	0	0
76519	OPHTAL BIOMET ULTRA ECHO A-MOD	1,022	1,792	8	18
90772	THERAPEUTIC,PROPHYLACTIC,DIAG	3	3	0	0
92002	OPHTHALMOLOGICAL SVC INTERMEDI	1,014	1,009	2,616	2,654
92004	OPHTHALMOLOGICAL SVC COMPREHEN	6,283	9,349	43,974	44,528
92005	Unknown Proc Cd 92005	0	0	8	8
92012	OPHTHALMOLOGICAL SVC ESTAB PT	8,360	12,700	4,289	4,968
92014	OPHTHALMOLOGICAL SVC ESTAB PT C	15,673	16,729	33,743	34,418
92015	DETERMINATION OF REFRACTIVE ST	21,589	22,210	80,473	83,049
92018	OPHTHAL EXAM W/ANEST W/MO MANI	141	176	10	10
92019	OPHTHAL EXAM W/ANEST W/MO MANI	25	28	1	1
92020	GONIOSCOPY (SEPARATE PROCEDURE	849	904	495	538
92025	COMPUTERIZED CORNEAL TOPOGRAPH	62	103	138	251
92060	SENSORIMOTOR EXAM W/MULTI MEAS	140	166	5	5
92070	FITTING/SUPPLY CONTACT LENS TX	51	64	58	69
92081	VISUAL FLD W/DIAG EVALUATION L	43	47	1,563	2,246
92082	VISUAL FLD W/DIAG EVAL INTERME	61	64	121	174
92083	VISUAL FLD W/DIAG EVAL EXTEND	2,538	2,901	1,676	2,113
92100	SERIAL TONOMETRY MULTI MEAS IN	6	6	17	20
92120	TONOGRAPHY W/INTERP/REPORT REC	3	4	243	275

optometry vs ophthalmology by proc code

68811	PROBING NASOLACRIM DUCT,REQ GE	74	90	0	0
68815	PROBING NASOLACRIM DUCT,INSRT	31	35	0	0
68816	PROB NASOLACRIMAL DUCT,BALLOON	3	5	0	0
68840	PROB LACRIM CANALCULLI W/WO IR	21	29	2	2
69000	DRAINAGE EXTERNAL EAR ABCESS H	3	3	0	0
69110	EXCISION EXTERN EAR PART/SIMPL	1	1	0	0
69200	REMOV FB EX AUD CANAL W/O GEN	13	14	0	0
69205	REM FB EX AUDIT CAN W/GEN ANES	2	2	0	0
69210	REM IMPACT CERUMEN(SEP PROCED)	18	19	0	0
69220	DEBRIDE MASTOID CAVITY SIMPLE	4	4	0	0
69421	MYRINGOTOMY INC ASPIR-INFLAT G	7	12	0	0
69424	REMOVE VENTILATING TUBE	1	1	0	0
69433	TYMPANOSTOMY(TUBE)LOCAL/TOP AN	6	6	0	0
69436	TYMPANOSTOMY(TUBE)GEN ANESTHES	249	495	0	0
69610	TYMPANIC MEMB REPAIR W/WO PREP	6	7	0	0
69620	MYRINGOPLASTY (SURG CONFIN TO	2	2	0	0
69631	TYMPANOPLASTY W/O MASTOIDECTOM	12	12	0	0
69643	TYMPANOPLASTY W/MASTOID W/INTA	2	2	0	0
70100	RADIO EXAM MANDIBLE PART LESS	1	1	0	0
70210	RADIO EXAM SINUSES PARAN LESS	7	7	0	0
70360	RADIO EXAM NECK SOFT TISSUE	2	2	0	0
70480	CT ORBIT/EAR/FOSSA,W/O CONTRAS	5	8	0	0
70486	CT, MAXILLOFACIAL,W/O CONTRAST	36	36	0	0
74514	Unknown Proc Cd 74514	0	0	1	1
76510	OPHTHALMIC U-SND/DIAG;B-SCAN/S	3	4	0	0
76511	OPHTHAL ULTRPSO ECHO A-MODE AM	1	2	0	0
76512	OPHTHAL ULTRASO ECHO CONTRACT	335	475	2	2
76513	OPHTHAL ULTRA,ECHO,DIAG;ANT SE	1	1	0	0
76514	OPHTHALMIC,ECHOGRAPH,DIAG;(COR	732	755	792	907
76516	OPHTHALMIC BIOMETRY ULTRA ECHO	6	9	1	1
76517	ECOGRAPHY OPHTHALMIC B-SCAN	1	1	0	0
76519	OPHTAL BIOMET ULTRA ECHO A-MOD	1,022	1,792	8	18
90772	THERAPEUTIC,PROPHYLACTIC,DIAG	3	3	0	0
92002	OPHTHALMOLOGICAL SVC INTERMEDI	1,014	1,009	2,616	2,654
92004	OPHTHALMOLOGICAL SVC COMPREHEN	9,283	9,349	43,974	44,528
92005	Unknown Proc Cd 92005	0	0	8	8
92012	OPHTHALMOLOGICAL SVC ESTAB PT	8,360	12,700	4,289	4,968
92014	OPHTHALMOLOGICAL SVC ESTAB PT C	15,673	16,729	33,743	34,418
92015	DETERMINATION OF REFRACTIVE ST	21,589	22,210	80,473	83,049
92018	OPHTHAL EXAM W/ANEST W/WO MANI	141	176	10	10
92019	OPHTHAL EXAM W/ANEST W/WO MANI	25	28	1	1
92020	GONIOSCOPY (SEPARATE PROCEDURE	849	904	495	538
92025	COMPUTERIZED CORNEAL TOPOGRAPH	62	103	138	251
92060	SENSORIMOTOR EXAM W/MULTI MEAS	140	166	5	5
92070	FITTING/SUPPLY CONTACT LENS TX	51	64	58	69
92081	VISUAL FLD W/DIAG EVALUATION L	43	47	1,563	2,246
92082	VISUAL FLD W/DIAG EVAL INTERME	61	64	121	174
92083	VISUAL FLD W/DIAG EVAL EXTEND	2,538	2,901	1,676	2,113
92100	SERIAL TONOMETRY MULTI MEAS IN	6	6	17	20
92120	TONOGRAPHY W/INTER/REPORT REC	3	4	243	275

optometry vs ophthalmology by proc code

92135	SCANNING COMPUTER OPHTHALMIC D	3,126	6,896	1,552	3,252
92136	OPHTH BIOMETRY,INTERFEROMETRY W	1,239	1,961	0	0
92140	PROVOC TESTS GLAUCOMA W/INTERP	0	0	1	4
92225	OPHTHALMOSCOPY EXT W/RETINAL DR	508	910	118	179
92226	OPHTHALMOSCOPY SUBSEQUENT	267	908	12	21
92235	FLUORESCIN ANGIOGRAPHY(INC IM	792	1,498	0	0
92240	INDOCYANINE-GREEN ANGIOGR W/IN	1	2	0	0
92250	FUNDUS PHOTOGRAPHY W/INTERP AN	1,752	2,002	3,184	3,846
92260	OPHTHALMODYNAMOMETRY	0	0	17	17
92270	ELECTRO OCULOGRAPHY	6	8	0	0
92275	ELECTRORETINOGRAPHY	19	24	0	0
92283	COLOR VISION EXAM	3	4	0	0
92285	EXT OCULAR PHOTO W/I&R RPT DOC	242	263	119	157
92286	SPEC ANTERIOR SEG PHOTOG W/INT	28	30	10	13
92310	PRESC OPTICAL/PHYSICAL CHARAC	43	44	383	389
92311	RX CORNEAL LENS APHAKIA ONE EY	1	1	0	0
92312	RX CORNEAL LENS APHAKIA BOTH E	2	2	1	1
92313	PRESCRIPTION & FITTING CORNEOS	0	0	1	1
92340	FITTING OF SPECTACLES EXC FOR	3,418	3,480	41,397	42,119
92499	UNLISTED OPHTHALMOLOGICAL SVC	9	13	5	6
92502	OTOLARYNGOLOGIC EXAM GENERAL A	1	1	0	0
92511	NASOPHARYNGOSCOPY W ENDOSCOPI	12	12	0	0
92541	SPONTANEOUS NYSTAGMUS TEST INC	1	1	0	0
92542	POSITIONAL NYSTAGMUS TEST MINI	1	1	0	0
92543	CALORIC VESTIB TEST EA IRRIG W	1	4	0	0
92544	OPTOKINETIC NYSTAGMUS BIDIREC/	1	1	0	0
92545	OSCILLATING TRACKING TEST WITH	1	1	0	0
92546	SINUSOIDAL VERTICAL AXIS ROTAT	1	1	0	0
92547	USE OF VERTICAL ELECTRODES-SEP	1	1	0	0
92552	PURE TONE AUDIOMETRY AIR ONLY	6	6	0	0
92555	SPEECH AUDIOMETRY THRESHOLD ON	28	28	0	0
92556	SPEECH AUDIOMETRY THRESHOLD W/	1	1	0	0
92557	COMP AUDIOMETRY THRESH EVAL &	141	144	0	0
92567	TYMPANOMETRY(IMPEDANCE TESTING	145	144	0	0
92568	ACOUSTIC REFLEX TESTING: THRES	1	1	0	0
92579	VISUAL REINFORCEMENT AUDIOMETR	35	41	0	0
92582	CONDITIONING PLAY AUDIOMETRY	2	2	0	0
92585	AUDITORY EVOKED POTENT FOR EVO	4	4	0	0
92587	EVOKED OTOACOUSTIC EMISSIONS,	15	19	0	0
93000	EKG 12 LEAD	5	6	0	0
95015	INTRADERML TST,SEQ/INCR, IMMD	2	2	3	2
95027	INTRADERM TST,SEQ/INCRE,IMMEDI	22	1,408	0	0
95060	OPHTHALMIC MUCOUS MEMBRANE TES	5	8	0	0
95115	PROFES SVS ALLERGEN NOT INC EX	11	157	0	0
95117	PROF SVS ALLERGEN IMMUNO NOT I	35	283	0	0
95165	PROF SVS SUPV/PROV ANTIG IMMUN	56	1,682	0	0
95930	VIS EVOKED POTENT (VEP) TST CE	8	8	0	0
96111	DEVELOP TEST EXT W/INTERP/REPO	0	0	77	77
99050	SVS PROVIDED O/SIDE CORE HRS-8	16	18	2	2
99058	OFFICE SERVICES ON EMERGENCY B	20	20	9	11

optometry vs ophthalmology by proc code

99070	SUPPLIES AND MATERIALS (EXCEPT	8	8	12	21
99201	EM OFFICE/OP SERV NEW PATIENT	29	29	112	112
99202	EM OFFICE/OP SERV NEW PATIENT	297	297	298	304
99203	EM OFFICE/OP SERV NEW PATIENT	556	554	559	563
99204	EM OFFICE/OP SERV NEW PATIENT	959	965	1,163	1,172
99205	EM OFFICE OP SERV NEW PATIENT	96	97	174	175
99211	EM OFFICE/OP SERV EST PATIENT	101	123	227	279
99212	EM OFFICE/OP SERV EST PATIENT	2,252	3,175	1,889	2,375
99213	EM OFFICE/OP SERV EST PATIENT	5,508	7,500	3,360	4,645
99214	EM OFFICE/OP SERV EST PATIENT	1,895	2,262	1,452	1,576
99215	EM OFFICE/OP SERV EST PATIENT	323	362	178	196
99221	EM IP SERV INITIAL HOSP CARE	4	4	0	0
99222	EM IP SERV INITIAL HOSP CARE	6	6	0	0
99223	EM IP SERV INITIAL HOSP CARE	2	2	0	0
99231	EM IP SERV SUBSEQ HOSP CARE L	181	442	0	0
99232	EM IP SERV SUBSEQ HOSP CARE L	218	477	0	0
99233	EM IP SERV SUBSEQ HOSP CARE L	22	21	0	0
99238	HOSPITAL DISCH DAY MGMT; 30 MI	2	2	0	0
99241	EM CONSULT OFFICE CONSULT LEV	42	42	2	2
99242	EM CONSULT OFFICE CONSULT LEV	499	500	224	225
99243	EM CONSULT OFFICE CONSULT LEV	2,589	2,618	64	66
99244	EM CONSULT OFFICE CONSULT LEV	2,946	3,016	171	172
99245	EM CONSULT OFFICE CONSULT LEV	162	163	5	5
99251	EM CONSULT INITIAL IP CONSULT	29	29	0	0
99252	EM CONSULT INITIAL IP CONSULT	449	455	0	0
99253	EM CONSULT INITIAL IP CONSULT	306	314	0	0
99254	EM CONSULT INITIAL IP CONSULT	93	96	0	0
99255	EM CONSULT INITIAL IP CONSULT	9	10	0	0
99281	EM EMERGENCY DEPARTMENT SERV	2	2	0	0
99282	EM EMERGENCY DEPARTMENT SERV	3	3	0	0
99283	EM EMERGENCY DEPARTMENT SERV	14	14	0	0
99284	EM EMERGENCY DEPARTMENT SERV	8	8	0	0
99285	EM EMERGENCY DEPARTMENT SERV	1	1	0	0
99304	INIT NURSING FACILITY CARE, DAY	8	6	0	0
99305	INIT NURSING FACILITY CARE, DAY	89	87	0	0
99308	SUBSEQUENT NURS FAC CARE, DAY, E	1	1	0	0
99324	DOMICIL/REST HM VISIT EM NEW	0	0	1	1
99334	DOMICIL/REST HM VISIT EM EST	0	0	50	50
99335	DOMICIL/REST HM VISIT EM EST	0	0	26	28
99339	MD SUPV PT HM, DOM/RSIT HM/MONTH	0	0	23	23
A4263	PERM, LONGTERM, NON-DISSOLVE L	14	19	8	16
A4550	MAJOR SURGICAL TRAY (INC ANEST	38	39	0	0
J0585	BOTULINUM TOXIN TYPE A, PER UN	23	3,408	0	0
J0696	INJEC CEFTRIAXONE SODIUM PER 2	6	13	0	0
J1040	INJEC METHYLPREDNISOLINE ACETA	10	10	0	0
J1100	INJ, DEXAMETHASONE SODIUM PHOS	3	13	0	0
J2503	INJECTION, PEGAPTANIB SODIUM,	2	2	0	0
J2778	INJECT, RANIBIZUMAB, 0.1 MG (L	1	5	0	0
J3301	INJECT TRIAMCINOLONE ACETONIDE	90	282	0	0
J3302	INJECT TRIAMCINOLONE DIACETATE	5	25	0	0

optometry vs ophthalmology by proc code

99070	SUPPLIES AND MATERIALS (EXCEPT	8	8	12	12	21
99201	EM OFFICE/OP SERV NEW PATIENT	29	29	112	112	
99202	EM OFFICE/OP SERV NEW PATIENT	297	297	298	304	
99203	EM OFFICE/OP SERV NEW PATIENT	556	554	559	563	
99204	EM OFFICE/OP SERV NEW PATIENT	959	965	1,163	1,172	
99205	EM OFFICE OP SERV NEW PATIENT	96	97	174	175	
99211	EM OFFICE/OP SERV EST PATIENT	101	123	227	279	
99212	EM OFFICE/OP SERV EST PATIENT	2,252	3,175	1,889	2,375	
99213	EM OFFICE/OP SERV EST PATIENT	5,508	7,500	3,360	4,645	
99214	EM OFFICE/OP SERV EST PATIENT	1,895	2,262	1,452	1,576	
99215	EM OFFICE/OP SERV EST PATIENT	323	362	178	196	
99221	EM IP SERV INITIAL HOSP CARE	4	4	0	0	
99222	EM IP SERV INITIAL HOSP CARE	6	6	0	0	
99223	EM IP SERV INITIAL HOSP CARE	2	2	0	0	
99231	EM IP SERV SUBSEQ HOSP CARE L	181	442	0	0	
99232	EM IP SERV SUBSEQ HOSP CARE L	218	477	0	0	
99233	EM IP SERV SUBSEQ HOSP CARE L	22	21	0	0	
99238	HOSPITAL DISCH DAY MGMT; 30 MI	2	2	0	0	
99241	EM CONSULT OFFICE CONSULT LEV	42	42	2	2	
99242	EM CONSULT OFFICE CONSULT LEV	499	500	224	225	
99243	EM CONSULT OFFICE CONSULT LEV	2,589	2,618	64	66	
99244	EM CONSULT OFFICE CONSULT LEV	2,946	3,016	171	172	
99245	EM CONSULT OFFICE CONSULT LEV	162	163	5	5	
99251	EM CONSULT INITIAL IP CONSULT	29	29	0	0	
99252	EM CONSULT INITIAL IP CONSULT	449	455	0	0	
99253	EM CONSULT INITIAL IP CONSULT	306	314	0	0	
99254	EM CONSULT INITIAL IP CONSULT	93	96	0	0	
99255	EM CONSULT INITIAL IP CONSULT	9	10	0	0	
99281	EM EMERGENCY DEPARTMENT SERV	2	2	0	0	
99282	EM EMERGENCY DEPARTMENT SERV	3	3	0	0	
99283	EM EMERGENCY DEPARTMENT SERV	14	14	0	0	
99284	EM EMERGENCY DEPARTMENT SERV	8	8	0	0	
99285	EM EMERGENCY DEPARTMENT SERV	1	1	0	0	
99304	INIT NURSING FACILITY CARE DAY	8	6	0	0	
99305	INIT NURSING FACILITY CARE DAY	89	87	0	0	
99308	SUBSEQUENT NURS FAC CARE DAY,E	1	1	0	0	
99324	DOMICIL/REST HM VISIT EM NEW	0	0	1	1	
99334	DOMICIL/REST HM VISIT EM EST	0	0	50	50	
99335	DOMICIL/REST HM VISIT EM EST	0	0	26	28	
99339	MD SUPV PT HM,DOM/RST HM/MONTH	0	0	23	23	
A4263	PERM, LONGTERM, NON-DISSOLVE L	14	19	8	16	
A4550	MAJOR SURGICAL TRAY (INC ANEST	38	39	0	0	
J0565	BOTULINUM TOXIN TYPE A, PER UN	23	3,408	0	0	
J0696	INJEC CEFTRIAXONE SODIUM PER 2	6	13	0	0	
J1040	INJEC METHYLPREDNISOLINE ACETA	10	10	0	0	
J1100	INJ, DEXAMETHASONE SODIUM PHOS	3	13	0	0	
J2503	INJECTION, PEGAPTANIB SODIUM,	2	2	0	0	
J2778	INJECT, RANIBIZUMAB, 0.1 MG (L	1	5	0	0	
J3301	INJECT TRIAMCINOLONE ACETONIDE	90	282	0	0	
J3302	INJECT TRIAMCINOLONE DIACETATE	5	25	0	0	

optometry vs ophthalmology by proc code

	UNCLASSIFIED DRUGS					
J3490		6	13	0	0	0
J9035	INJECTION, BEVACIZUMAB, 10 MG	180	321	0		0
J9190	CHEMO FLUOROURACIL, 500 MG	3	12	0		0
V2500	CONTACT, PMMA, SPHERICAL, PER LE	0	0	1		1
V2510	CONTACT GAS PERMEABLE, SPHERICA	6	7	15		24
V2511	CONTACT, GAS PERM, TORIC, PRISM B	1	3	13		23
V2520	CONTACT, HYDROPHILIC, SPHERICAL,	2	2	19		33
V2521	CONTACT, HYDROPHILIC, TORIC/PRISM	2	3	13		25
V2632	POSTERIOR CHAMBER INTRAOCULAR	15	22	0		0
		45,909	132,348	94,348		239,413