

METRO-PLUS BILLING FORM

• 516-791-5630 •

J. SKLAR COMPUTERS • P.O. BOX 340 • VALLEY STREAM, NY 11582

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METRO-PLUS PROVIDER # _____ PROVIDER NAME: _____

PATIENT: LAST NAME: _____ FIRST NAME: _____

I.D. # - DOB: Sex: M F

DATE OF SERVICE

Diagnosis: (Optional) _____ Blurred Vision (Default) H538

REPLACEMENT?

EXAMINATION CODES: CIRCLE CODE(S) FOR SERVICES RENDERED:

- | | |
|----------------------------------------------------------------|----------------------------------------------------------|
| f1 92002 ___ INTERMED. EXAM - INITIAL | -f1 92012 ___ INTERMED. EXAM - SUBSEQUENT. |
| f2 92004 ___ COMPREHENSIVE. EXAM | -f2 92014 ___ COMPREHENSIVE. EXAM - SUBSEQUENT |
| -r 92015 ___ REFRACTION | a-F 92250 ___ FUNDUS PHOTO |
| af1 99212 ___ FOLLOW UP EXAM Dx:-Code : _____ | -I 92202 ___ Ophthalmoscopy (Not allowed with photos!) |
| 99213 ___ FOLLOW UP EXAM Dx:-Code : _____ | a-E 92285 ___ EXTERNAL - PHOTO |
| -f8 92082 ___ VISUAL FIELDS- 2 isopter Suprathreshold + Report | 67820 ___ Epilate Eyelash |
| a-f8 92083 ___ VISUAL FIELDS- Extended Threshold + Report | 76512 ___ B-SCAN (specify 1 or 2 eyes) |
| 76514 ___ PACHIMETRY | 92132 ___ O C T Anterior Segment Evaluation + Report |
| 92020 ___ GONIOSCOPY | 92133 ___ O C T Optic Nerve Evaluation + Report |
| | 92134 ___ O C T Macula Evaluation + Report |

MATERIAL CODES: (INDICATE ONE OR TWO)

SINGLE VISION: SINGLE VISION SPHERES

f3 V2100 ___ PL - 4.00 -f7 V2101 ___ 4.25 - 7.00 V2102 ___ 7.25 - 20.00

SINGLE VISION COMPOUNDS

f4 V2103 ___ PL - 4.00 = PL - 2.00 CYL f6 V2107 ___ 4.25 - 7.00 = PL - 2.00 V2111 ___ 7.25 - 12.00 = PL - 2.00
f5 V2104 ___ PL - 4.00 = 2.25 - 4.00 V2108 ___ 4.25 - 7.00 = 2.25 - 4.00 V2112 ___ 7.25 - 12.00 = 2.25 - 4.00

BIFOCAL BIFOCAL SPHERES

-f3 V2200 ___ PL -4.00 af7 V2201 ___ 4.25- 7.00 V2202 ___ 7.25 - 20.00

BIFOCAL COMPOUNDS

-f4 V2203 ___ PL -4.00= PL -2.00 -f6 V2207 ___ 4.25- 7.00= PL -2.00 V2211 ___ 7.25 - 12.00 = PL - 2.00
-f5 V2204 ___ PL- 4.00= 2.25-4.00 V2208 ___ 4.25-7.00= 2.25-4.00 V2212 ___ 7.25 - 12.00 = 2.25 - 4.00

OTHER: MATERIALS AND DISPENSING SERVICES

-P V2784 ___ Poly-Carbonate Lens -H V2782 ___ 1.54 (or higher) Index Lens -U V2755 ___ Ultra Violet Coating

-F V2020 ___ FRAME -D 92340 ___ DISPENSE S.V. -B 92341 ___ DISPENSE BIFOCAL 92370 ___ REPAIR

Other: _____

Other: _____