MedStar Health, Inc. POLICY AND PROCEDURE MANUAL

Policy Number: MP.009.MH Last Review Date: 11/08/2018 Effective Date: 02/01/2019

MP.009.MH – Presbyopia Correcting Intraocular Lenses (PIOLs) and Astigmatism Correcting Intraocular Lenses (ACIOLs)

This policy applies to the following lines of business:

- ✓ MedStar Employee (Select)
- ✓ MedStar CareFirst PPO

MedStar Health considers **Presbyopia Correcting Intraocular Lenses (PIOLs) and Astigmatism Correcting Intraocular Lenses (ACIOLs)** medically necessary for the following indications:

- 1. Conventional IOLs during cataract surgery.
 - a. If the member requests A-CIOLs or PIOLs, [client] will pay the portion of the lens cost equal to the cost of IOLs.
 - b. The additional costs of the specialty lenses will be the responsibility of the member. [client] will pay for insertion of the lenses.
- 2. The physician charges (for office procedures) will also be paid as the same level as the conventional IOLs.

Limitations

The additional cost of the PIOLs or A-CIOLs (where it exceeds the cost of IOLs) is not covered and the member assumes responsibility for the additional expenses.

Background

Cataracts cloud the natural lens of the eye, leading to vision loss, and are a result of normal aging. There are approximately 3 million surgeries for cataract removal and replacement with an artificial intraocular lens (IOL) annually in the United States.

Presbyopia-correcting IOLs (PIOLs) provide near, intermediate, and distance vision without the need for eyeglasses and contact lenses following cataract surgery. Similarly, ACIOL provide correction and/or compensate for the imperfect curvature of the cornea (astigmatism).

The Centers for Medicare and Medicaid Services (CMS) announced the intent to provide beneficiaries with the choice to receive PIOLs when they have cataract surgery.



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In addition, in January 2007, CMS ruled that members with astigmatism can receive ACIOLs during cataract surgery.

The following non-inclusive list of manufacturers are recognized by CMS as resources for PIOLs:

- Cyrstalens[™] by Eyeonics, Inc.
- AcrySof RESTOR[™] by Alcon, Inc.
- ReZoom[™] by Advanced Medical Optics Inc.

ACIOLs:

- Acrysof[®] Toric IOL (models SN60TS, SN60T4 and SN60T5) manufactured by Alcon Labs, Inc.
- Silicon 2P Toric IOL (models AA4203TF and AA4203TL) manufactured by STARR Surgical

Codes:

CPT Codes	
Code	Description
66982	Extracapsular cataract removal with insertion of intraocular lens prosthesis (1 stage procedure) manual or mechanical technique (eg, irrigation and aspiration or phacoemulsification), complex, requiring devices or techniques not generally used in routine cataract surgery (eg, iris expansion device, suture support for intraocular lens, or primary posterior capsulorrhexis) or performed on patients in the amblyogenic developmental stage.
66983	Intracapsular cataract extraction with insertion of intraocular lens prosthesis (1 stage procedure).
66984	<i>Extracapsular cataract removal with insertion of intraocular lens prosthesis (1 stage procedure)</i> manual or mechanical technique (eg, irrigation and aspiration or phacoemulsification).
HCPCS code	es covered if selection criteria are met (If Appropriate):
V2630	Anterior chamber intraocular lens
V2631	Iris supported intraocular lens
V2632	Posterior chamber intraocular lens
Applicable C	Coding for PIOL and A-CIOL additional costs are not covered:
HCPCS cove	ered at cost of regular IOL:

HCPCS covered at cost of regular IOL:



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V2787	Astigmatism - correcting function of intraocular lens
V2788	Presbyopia - correcting function of intraocular lens. (PIOLs)

References

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- Center for Medicare and Medicaid Services (CMS). Medicare Learning Network (MLN) Matters, MM#5527-Revised. Transmittal CR#1228CP. Instructions for Implementing the CMS Ruling CMS-1536-R; Astigmatism-Correcting Intraocular Lens (A-C IOLs). Revised: 04/10/2008. Updated: 08/27/2012. <u>http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/MM5527.pdf</u>
- Centers for Medicare and Medicaid Services (CMS). Local Coverage Determination (LCD) No L35091 – Cataract Extraction (including Complex Cataract Surgery. (Contractor: Novitas Solutions, Inc.) Revision Effective Date: 08/10/2017. <u>https://www.cms.gov/medicare-coverage-database/details/lcddetails.aspx?LCDId=35091&ver=31&DocID=L35091+&bc=gAAAABAAAAA&
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- Centers for Medicare and Medicaid Services (CMS). Medicare Learning Network (MLN) Matters No. MM3927: Transmittal # 636: Implementation of the Centers for Medicare & Medicaid Services (CMS) Ruling 05-01 Regarding Presbyopia-Correcting Intraocular Lenses (IOLs) for Medicare Beneficiaries. Implemented



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Disclaimer:



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