

Medical Coverage Policy | Multifocal / Accommodating Intraocular Lens (IOL)



EFFECTIVE DATE: 10|01|2004

POLICY LAST UPDATED: 11|18|2014

OVERVIEW

This policy describes coverage of intraocular lenses (IOLs), including but not limited to accommodated and multifocal IOLs, that are implanted after cataract surgery and are designed to restore a fuller range of near, intermediate and far distance vision as compared to monofocal IOLs. This fuller range of vision generally reduces the need for additional eyeglasses or contact lenses after the surgery.

PRIOR AUTHORIZATION

Prior authorization review is not required.

POLICY STATEMENT

BlueCHiP for Medicare and Commercial

Multifocal/accommodating intraocular lenses are not covered following cataract surgery as there are no medical advantages of multifocal/accommodating lenses over standard intraocular lenses.

However, members may request the insertion of Presbyopia Correcting Intraocular Lenses or Astigmatism-Correcting Intraocular Lenses instead of a standard, or monofocal, IOL following removal of a cataract and will be responsible for any additional cost of the P-C IOL including physician services required to monitor a patient receiving a presbyopia-correcting IOL. For example, eye examinations performed to determine the refractive state of the eyes following insertion of a presbyopia-correcting IOL.

MEDICAL CRITERIA

Not applicable.

BACKGROUND

Intraocular lens (IOL) implants are lenses used to replace the existing natural lens of the eye and are used to treat aphakia. Aphakia is the absence of the natural lens which may result from extraction of the lens (.e.g., cataract surgery), penetrating trauma, or from congenital conditions. Procedures for which IOLs are commonly implanted include cataract surgery and clear lens extraction for the correction of refractive errors.

The current cataract procedure of choice is an extracapsular technique (removal of only the lens) with implantation of a posterior chamber (behind the iris) intraocular lens (IOL) within the capsular bag. Replacement of the lens restores optical focusing power lost by removal of the natural crystalline lens. The choice of IOL is dependent on physician recommendation and the visual needs of each individual patient.

Monofocal IOLs are considered the standard lens for replacement and usually require corrective lenses or eyeglasses after surgery for reading and near vision tasks. However, various types of intraocular lens implants are available and now include presbyopia correcting IOLs (i.e., multifocal and pseudoaccommodating). Presbyopia correcting IOLs are intended to reduce the need for eyeglasses or contact lenses that are commonly needed to provide near, intermediate and distant vision after a standard monofocal IOL is inserted.

Multifocal IOL: Multifocal IOLs are designed to provide distance and near vision simultaneously and offer multiple focal points within the IOL. They are considered an optional lens for patients in need of cataract surgery and may be classified as refractive or diffractive, depending on the technology of the lens. Diffractive lenses act similar to a bifocal; refractive lenses apply differing refractive powers to concentric portions of the

lens. In general, this multifocal lens structure focuses light rays from both distance and near. The lens does not restore good intermediate vision. Despite the improvement in near vision, adverse events associated with these lenses include increased glare and halos at night, variable loss of clarity, and loss of low-contrast acuity. Individuals should be counseled regarding potential adverse events and effects on overall quality of life. Various multifocal lenses have been approved by the FDA within the last few years and include, but are not limited to the following:

- Array® Model SA40 (Advanced Medical Optics [AMO], Santa Ana, CA) with multifocal rings/zones
- ReZoom™ (AMO) (a second generation lens to the Array) with Balanced View Optics™ technology distributing light over five optic zones
- AcrySof® ReStor® (Alcon Surgical, Fort Worth, TX) an apodized diffractive lens
- Tecnis ZM900 and ZMAOO (AMO, Santa Ana, CA), a multifocal aspheric IOL

Presbyopia Correcting IOL and Astigmatism Correcting IOL

More recently, presbyopia correcting lenses (i.e., multifocal, pseudoaccommodating) with or without additional features (e.g., toric, aspheric, ultraviolet protection), have been developed to improve visual acuity and may be referred to as premium IOLs. Multifocal IOLs offer both distant and near vision. The pseudoaccommodating IOLs, offers near, intermediate and distant vision. Overall, the intent of multifocal and pseudoaccommodating lenses is to provide distant to near vision capability when compared to the use of a monofocal IOL, and to reduce dependence on eyeglasses following cataract surgery.

COVERAGE

Benefits may vary between groups/contracts. Please refer to the appropriate Evidence of Coverage or Subscriber Agreement for surgery benefits.

CODING

BlueCHiP for Medicare and Commercial

The following HCPCS code for a standard IOL is covered:

V2632

The following codes are not covered as they are considered a convenience item.

However, if a member requests one of these lenses following cataract extractions, then payment is allowed up to the cost of standard intraocular monofocal lenses. The member is responsible for the difference in cost for lenses and any special services related to those lenses:

V2787, V2788

RELATED POLICIES

Therapeutic Eyeglasses and Contact Lenses

PUBLISHED

Provider Update	Jan 2015
Provider Update	Nov 2013
Provider Update	Jun 2012
Provider Update	Jul 2011
Provider Update	Jun 2010
Provider Update	Jul 2009
Policy Update	May 2008

REFERENCES

1. Centers for Medicare and Medicaid Services. National Coverage Determination (NCD) for Intraocular Lenses (IOLs) (80.12)

2. Alfonso JF, et al. Intermediate visual function with different multifocal intraocular lens models. J Cataract Refract Surg 2010 May;36(5):733-9.
3. Agresta B, et al. Distance and near visual acuity improvement after implantation of multifocal intraocular lenses in cataract patients with presbyopia: a systematic review. J Refract Surg 2012 Jun;28(6):426-35.
4. Agresta B, et al. Visual acuity improvements after implantation of toric intraocular lenses in cataract patients with astigmatism: a systematic review. BMC Ophthalmol 2012 Aug 15;12:41.
5. Gooi P, et al. Review of presbyopia IOLs: multifocal and accommodating IOLs. Int Ophthalmol Clin 2012 Spring;52(2):41-50.
6. Tsaousis KT, et al. Binocularity enhances visual acuity of eyes implanted with multifocal intraocular lenses. J Refract Surg 2013 Apr;29(4):246-50.

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