

Corneal Cross-linking (CXL) Epithelium-off

State(s):		LOB(s):
🛛 Idaho	🖂 Montana 🖾 Oregon 🖾 Washington 🔲 Other:	🖾 Commercial 🖾 Medicare 🖾 Medicaid

Enterprise Policy

Clinical Guidelines are written when necessary to provide guidance to providers and members in order to outline and clarify coverage criteria in accordance with the terms of the Member's policy. This Clinical Guideline only applies to PacificSource Health Plans, PacificSource Community Health Plans, and PacificSource Community Solutions in Idaho, Montana, Oregon, and Washington. Because of the changing nature of medicine, this list is subject to revision and update without notice. This document is designed for informational purposes only and is not an authorization or contract. Coverage determination are made on a case-by-case basis and subject to the terms, conditions, limitations, and exclusions of the Member's policy. Member policies differ in benefits and to the extent a conflict exists between the Clinical Guideline and the Member's policy, the Member's policy language shall control. Clinical Guidelines do not constitute medical advice nor guarantee coverage.

Background

Corneal cross-linking (CXL) is an outpatient procedure designed to treat progressive keratoconus and corneal ectasia Keratoconus is a progressive eye disease characterized by deformation (becomes cone shaped) of the cornea. Corneal ectasia is a form of keratoconus that occurs after refractive surgery. The goal of CXL is to stop the cornea from getting thinner, weaker, and more irregular in shape.

The CXL procedure strengthens and stabilizes the cornea by creating new links between collagen fibers within the cornea. The two-step procedure applies liquid riboflavin (vitamin B2) to the surface of the eye immediately followed by a controlled exposure of the eye to ultraviolet light.

There are two basic types of corneal cross-linking: Epithelium-off CXL and Epithelium-on CXL. Epithelium-off CXL removes the thin outer outer layer (epithelium) of the cornea to allow the liquid riboflavin to more easily penetrate the cornel tissue.

Epithelium-on (transepithelial) corneal collagen cross-linkage (CXL) is considered experimental, investigational or unproven.

Criteria

Commercial

PacificSource considers corneal collagen cross-linking (CXL) epithelium-off using riboflavin and ultraviolet a medically necessary treatment when **ALL** the following are met:

- A. ONE of the following diagnosis:
 - 1. Progressive keratoconus; OR

2. Corneal ectasia.

AND

B. ONE of the following:

- 1. An increase of one diopter (D) in the steepest keratometry value;
- **2.** An increase of one D in regular astigmatism evaluated by subjective manifest refraction;
- **3.** A myopic shift (decrease in the spherical equivalent) of 0.50 D on subjective manifest refraction;
- **4.** A decrease greater or equal to 0.1 mm in the back optical zone radius in rigid contact lens wearers;
- 5. Documented keratoconus by tomography in patients under the age of 25.

NOTE: Riboflavin (Photrexa) is considered part of the cost of the corneal collagen crosslinking (CXL) procedure and is not separately reimbursable.

Medicaid

PacificSource Community Solutions follows Oregon Health Plan (OHP) Oregon Administrative Rules (OARs) 410-120-1200(2)(a)-(ff), 410-120-0000(137), 410-141-3825(1)(a-i), and considers Corneal Cross-linking (CXL) Epithelium-off not a covered benefit.

Medicare

PacificSource Medicare follows CMS guidelines and criteria. In the absence of internal policy guidelines, CMS criteria, and evidence-based criteria, requests are reviewed on an individual basis for determination of coverage and medical necessity.

Experimental/Investigational/Unproven

PacificSource considers the following procedures experimental, investigational or unproven:

- Epithelium-on (transepithelial) corneal collagen cross-linkage (CXL).
- Partial Epithelium-off Corneal Cross-linking (P-CXL).
- Topography-guided Corneal Cross-linking (TGCXL).

Coding Information

The following list of codes are for informational purposes only and may not be all-inclusive. Deleted codes and codes which are not effective at the time the service is rendered may not be eligible for reimbursement.

0402T Collagen cross-linking of cornea (including removal of the corneal epithelium and intraoperative pachymetry when performed)

66999 Unlisted procedure, anterior segment of eye

J2787 Riboflavin 5'-phosphate, ophthalmic solution, up to 3 mL Page 2 of 4 CPT® codes, descriptions and materials are copyrighted by the American Medical Association (AMA). HCPCS® codes, descriptions and materials are copyrighted by Centers for Medicare and Medicaid Services (CMS).

Definitions

- Corneal epithelium outer layer of the cornea, slightly less than 10 percent of the thickness of the entire cornea.
- Corneal stroma middle layer of the cornea about 90 percent of the thickness of the overall composed of strands of connective tissue called collagen fibrils.
- Ectasia or Keratectasia is a serious long-term complication of laser in situ keratomileusis (LASIK) surgery and photorefractive keratectomy; occurs postoperatively and primarily affects older populations. Characterized by progressive thinning and steepening of the cornea, resulting in corneal optical irregularities and loss of visual acuity.
- Keratoconus a degeneration of the structure of the cornea in which the corneal surface thins and begins to bulge into a cone shape, which is usually a myopic shift often associated with irregular astigmatism, leading to visual impairment.

References

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Appendix

Policy Number: [Policy Numb	er]			
Effective: 4/23/2020	Next review:	2/1/2023		
Policy type: Enterprise				
Author(s):				
Depts: Health Services				
Applicable regulation(s): [Applicable Regulations(s)]				
Commercial Ops: 1/2022				
Government Ops: 2/2022				