

March Vision Care

YAG Laser Capsulotomy

Subject: YAG Laser Capsulotomy

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Overview

Coverage for YAG laser surgery will be provide when medically indicated and in accordance with applicable state requirements and, as specific to Medicare, national and local coverage determinations. To establish medical necessity March Vision aligns its criteria with the evidence and consensus based clinical practice guidelines set forth by the American Academy of Ophthalmology (AAO)². The AAO incorporates evidence based best practice and FDA approval and/or recommendations.

Clinical Criteria

March Vision considers YAG laser capsulotomy medically necessary when performed following cataract extraction) in members with visually significant clouding (opacification) of the posterior portion of the membrane that surrounds the lens (the posterior capsule). After cataract removal in the same eye, unless the laser capsulotomy is scheduled at the same time as cataract removal surgery or performed prophylactically.

When performed within 6 months of surgery only if one of the following medical necessity criteria is met:

- The member has a best-corrected visual acuity (BCVA) of 20/50 or worse and *both* of the following conditions are met:
 - The eye examination confirms that posterior capsular opacification is present; *and*
 - The visual impairment has interfered with the member's ability to carry out needed or desired activities; *or*
- The member has a BCVA of 20/40 or better and *all* of the following conditions are met:
 - The eye examination confirms that posterior capsular opacification is present; *and*
 - Visual disability fluctuates as a result of symptoms of glare or symptoms of decreased contrast; *and*
 - Visual disability has interfered with the member's ability to carry out needed or desired activities; *or*
- When used for members with posterior capsular opacification regardless of functional impairment for *any* of the following reasons:
 - To provide better visualization of the posterior pole for members with:

- ❖ Diabetic retinopathy; or
- ❖ Macular disease; or
- ❖ Retinal detachment; or
- ❖ To diagnose posterior pole tumors; or
- ❖ To evaluate the optic nerve head.

If none of the above criteria is met, YAG laser capsulotomy performed within 6 months of cataract surgery is considered experimental and investigational because of a lack of evidence of the value of routine prophylactic capsulotomy following cataract surgery.

March Vision considers YAG laser for the following other conditions medically necessary:

- Peripheral iridotomy medically necessary for primary angle closure and primary angle-closure glaucoma.
- Prior to intraocular lens insertion into the anterior chamber to avoid post-operative iris bombe or pupil block.
- Treatment of primary congenital glaucoma.

March Vision considers YAG laser experimental and investigational for the following:

- Peripheral iridotomy experimental and investigational for the prevention of pigment dispersion glaucoma.
- Goniopuncture for the rescue of failed trabeculectomy.
- Vitreolysis for the treatment of vitreous degeneration and vitreous floaters.
- Anterior hyaloidotomy for the treatment of trapped triamcinolone behind the lens after intra-vitreous injection.
- Posterior hyaloidotomy for the clearance of pre-macular hemorrhages.

CPT Coding

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.

<u>66821</u>	<u>Discission of secondary membranous cataract (opacified posterior lens capsule and/or anterior hyaloid); laser surgery (eg, YAG Laser) (1 or more stages)</u>
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Quantity Limits

YAG Laser is payable a maximum of 1 time per eye per lifetime.

YAG laser has a 90 day global period.