

## Final Comments for Ophthalmic Biometry (OPHTH-006) DL31624

### Comment:

The Ophthalmic Biometry LCD was reviewed by several provider specialists who found the policy to be clinically relevant and useful.

### Response:

WPS Medicare thanks all who reviewed this LCD and provided their medical expertise and comments.

### Comment:

A provider questioned the appropriateness of the statement “*Cataract surgery is an elective procedure*” that is found in the section titled Limitations; paragraph A, The provider further stated that “cataract surgery is done to improve patients’ life style and prevent blindness...”

### Response:

The term “elective surgery” is taken directly from CMS Publication 100-03 Ch. 1, §10.1. and cannot be changed by WPS Medicare

### Comment:

A provider asked if the word “provider” should be replaced with “optometrist” in the statement found in the Limitations section that states

If biometry is repeated by the operating surgeon due to the inadequacy of the study, the original eye care physician/provider should anticipate not being reimbursed for the study eyecare physician/optometrist” or is stated correctly?

### Response:

The word provider encompasses the practice of optometry and is found in similar Medicare policies. Therefore, the wording referenced will not be changed at this time.

### Comment:

A provider found the following statement to be grammatically incorrect;

*A. Ophthalmic biometry by ultrasound echography, A-scan Ophthalmic A-scan is covered under Medicare when performed prior to cataract surgery. Because cataract surgery is an elective procedure, the patient may decide not to have surgery until later, or to have the surgery performed by a physician other than the diagnosing physician. In these situations, it may be reasonable for the operating physician to conduct another examination. To the extent the additional tests are considered reasonable and necessary by the carrier’s medical staff. (CMS Pub. 100-03, Ch. 1, §10.1.*

### Response:

The above paragraph is an excerpt taken directly from CMS Publication 100-03 Ch. 1, §10.1. and cannot be changed by WPS Medicare.

### Comment:

A provider quoted the following statement in the policy

Ophthalmic biometry for lens power calculation should not be performed unless a decision to remove the cataract has been made by the patient and the surgeon. If the biometry is performed by an optometrist, he/she should do so in coordination with the operating surgeon so that only one procedure is necessary. If biometry is repeated by the operating surgeon due to the inadequacy of the study, the original eye care physician/provider should anticipate not being reimbursed for the study. The provider then offered the following medical opinion;

Often patients are on steroids or have had radiation for cancer. This may leave them with a posterior subcapsular plaque that is not yet in the visual axis. It is important to obtain the IOL master A scan before the plaque obstructs the visual axis. This can be well BEFORE a decision to remove the cataract has been made by the patient and the surgeon.

**Response:**

We agree that any test done preoperatively, must be used for the care and treatment of the beneficiary.

**Comment:**

An ophthalmologist commented “this test is done prior to cataract surgery, the diagnosis codes seem appropriate. This test is always done on both eyes.” This provider found the first two (2) paragraphs in the Billing and Coding Guidelines redundant.

**Response:**

The paragraphs referred to do have similar information but are for unique CPT codes. To help clarify that the information is for specific CPT codes, each paragraph now has a title that is bolded and clearly states the CPT code discussed.

**Comment:**

A Mac J5 provider asked about the addition of CPT code 92132, a new CPT code for 2011, and stated that this code can be found in another Medicare contractor’s LCD.

**Response:**

CPT code 92132 by reason of definition (scanning ophthalmic diagnostic imaging, anterior segment) is not a topic of this LCD.