

**Final Comments for Visual Fields (OPHTH-054) DL31348**

**Comment:**

A provider requested that in the Indications and Limitations of Coverage and/or Medical Necessity, under the “visual fields will be considered medically necessary”, statement number three (3) that asymmetric intraocular measurements of 2-3 mm is changed to 2mm HG....

**Response:**

Statement number three (3) has been changed and now states “...asymmetric intraocular measurements of greater than 2 mm Hg...”

**Comment:**

A provider requested that in the Indications and Limitations of Coverage and/or Medical Necessity, under the “visual fields will be considered medically necessary”, statement number ten (10) consider adding (e.g. orbital tumor, thyroid eye disease, etc.)

**Response:**

Statement number ten (10) has been amended to state;

A disorder of the orbit, potentially affecting the visual field (e.g. orbital tumor, thyroid disease, etc.).

**Comment:**

A provider requested that in the Documentation Requirements section that WPS Medicare considers deleting the frequency reference as frequency cannot be determined in advance.

**Response:**

WPS Medicare agrees with this request and has amended the statement to state the following:

*The medical record documentation must clearly indicate the medical necessity of the visual field testing and the results of the visual field test must be maintained in the patient's medical record.*

**Comment:**

A request to add ICD – 9-CM Codes 242.2, 242.3, 242.4, 242.8 and 242.9 was received.

**Response:**

The ICD-9-CM codes were evaluated and the coding range for thyrotoxicosis expanded as follows;

242.00- 242.91	Thyrotoxicosis with or without goiter
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**Comment:**

A provider found a word error in the ICD-9-CM coding list for codes 362.50-362.57. The word lobe was used instead of pole.

**Response:**

The diagnostic description for ICD-9-CM codes 362.50 -362.57 has been corrected to read as follows:

362.50- 362.57	Degeneration of macular and posterior pole
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**Comment:**

Two providers questioned if ICD-9-CM codes 239.89 and 364.9 were omitted by accident or intentionally.

**Response:**

ICD-9-CM codes 239.89 and 364.9 have been evaluated and will not be included in this LCD at this time.

**Comments:**

A provider asked if this draft policy, when finalized and put into effect, will be in effect for the Part B Minnesota Providers. The provider went on to explain that “given the contested MAC assignments, it is unclear if Part B providers in Minnesota are governed by these LCDs or if there is another governing set.”

**Response**

Visual Fields (OPHTH-054) will be effective for all WPS Medicare contracts, which include Legacy B (WI, IL, MI, and MN), Legacy A (Former Mutual of Omaha), MAC A and MAC B (IA, KS, MO. and NE).

**Comment:**

A provider suggested that statement number 15, found in the Indications and Limitations section is changed from Plaquenil, which is a trade name, to hydroxychloroquine, the generic drug name.

**Response:**

Statement number 15 has been changed and now reads

Medication treatment (e.g., hydroxychloroquine) which has a high risk of potentially affecting the visual system.

**Comment:**

A provider requested clarification or the clinical rationale of statement number 17, which says in the section titled

**Visual field examinations will be considered medically necessary under the following conditions**

17. Diagnosis and monitoring visual field loss due to blepharoptosis or to disease involving the cornea, lens, retina, optic nerve and intracranial visual pathway.

**Response:**

At present WPS Medicare does not have adequate peer reviewed literature to support this statement. Therefore, statement number 17 has been deleted.

**Comment:**

A provider commented that the ICD-9-CM codes that are specific for keratitis are not indications for peripheral vision testing such as visual fields.

**Response:**

WPS Medicare agrees and has removed ICD-9 codes 370.00-370.9 from the Visual Fields Testing LCD.

**Comment:**

A provider stated the following;

*The diagnoses of degenerations of the macula and posterior pole, suggest that macular degeneration would be an indication for peripheral vision testing. As with diseases of the cornea and lens, the central visual acuity is the parameter of whether there is significant macular degeneration. Visual field testing would likely show some central defect, but this would not be germane to either the diagnosis or treatment of the disease. I conferred with one of our retinologists and he has never ordered a visual field on any macular degeneration patient, other than those who have a hereditary retinal degeneration or juvenile macular degeneration. This and post cataract extraction include a great number of patients, none of whom would need formal peripheral vision testing.*

**Response:**

WPS Medicare evaluated the request to remove ICD-9 diagnosis codes for macular degeneration; because visual field testing may be clinically indicated in some circumstances for those with macular degeneration, we will not remove ICD-9 –CM codes 362.50 – 362.57 at this time.

**Comment:**

A provider stated the following;

*Lagophthalmos and its associated codes cause exposure of the cornea which can cause a keratitis from desiccation; however, incomplete closure of the eye does not cause visual field loss and its effect on vision would be recorded by central visual acuity rather than peripheral vision testing.*

**Response:**

WPS Medicare has evaluated the above comment and concurs with the provider. By definition, lagophthalmos is an abnormal condition in which an eye cannot close completely.

Therefore ICD-9-CM codes 374.20-374.23 have been removed from this LCD.

**Comment:**

A provider stated the following;

I am surprised to see so many non-indications for peripheral visual field testing in a policy and I hope these will be removed.

This provider suggested the removal of the following codes;

370, 00-370.9, 374.20-374.23, 378.00-378.9, 930.0-930.9, V45.61, V45.69 and V58.64.

**Response:**

WPS Medicare agrees that indications, rather than non-indications make more sense.

Therefore, after careful evaluation, ICD-9-CM codes 370, 00-370.9, 374.20-374.23, 378.00-378.9, 930.0-930.9, V45.61, V45.69 and V58.64, have been removed from the policy for Visual Fields. If visual field testing for a patient with one of the conditions described by 370, 00-370.9, 374.20-374.23, 378.00-378.9, 930.0-930.9, V45.61, V45.69 and V58.64 is medically warranted, a diagnosis found listed in the ICD-9-CM coding section should be listed as the primary indication on the claim submitted to WPS Medicare.

**Comment:**

Several ophthalmologists and optometrists reviewed the Visual Fields draft LCD and found it to be acceptable

**Response:**

WPS Medicare thanks all interested parties who took their time to review this LCD.