Subject: Corneal Topography*

Effective Date: January 28, 2003

Department(s): Utilization Management

Policy: Corneal topography is reimbursable under Plans administered by QualCare, Inc.

Objective: To provide proper and consistent reimbursement for a medically necessary service.

Procedure:

➤ The presence of a corneal lesion whose correction is covered by the specific Plan must be documented. These include, but are not limited to

- Post-traumatic corneal scarring (ICD-9 371.00; ICD-10 H17.89, H17.9)
- Complications of corneal transplant (ICD-9 996.51; ICD-10 T85.318A, T85.328A, T85.398A, T86.840, T86.841)
- Postoperative astigmatism after cataract or glaucoma or lens implant surgery (ICD-9 996.5; ICD-10 T85.318A, T85.328A, T85.398A, T86.840, T86.841)
- Corneal dystrophy (ICD-9 371.50 – 371.58; ICD-10 H18.50- H18.55, H18.59)
- Bullous keratopathy (ICD-9 371.23; ICD-10 H18.10-H18.13)
- Preoperative assessment for phototherapeutic keratotomy

➢ The correct codes for corneal topography are: 92025.

➢ Corneal topography is not covered when performed in connection with non-covered corneal surgery such as LASIK or other refractive procedures, nor is it covered as part of the pre-operative assessment of patients with cataracts and normal corneas.

References


Wilson SE. Computerized corneal topography and its importance to wavefront technology. Cornea 2001;20(5):441-454 (July)


Rabinowitz YS. Keratoconus. Surv Ophthalmol 1998;42(4):297-319 (Jan-Feb)
*Consistent with Summary Plan Description (SPD). When there is discordance between this policy and the SPD, the provisions of the SPD prevail.