

# Local Coverage Determination (LCD): Cataract Extraction (L33558)

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## Contractor Information

Contractor Name	Contract Type	Contract Number	Jurisdiction State(s)
<a href="#">National Government Services, Inc.</a>	MAC - Part A	06101 - MAC A	N/A Illinois
<a href="#">National Government Services, Inc.</a>	MAC - Part B	06102 - MAC B	N/A Illinois
<a href="#">National Government Services, Inc.</a>	MAC - Part A	06201 - MAC A	N/A Minnesota
<a href="#">National Government Services, Inc.</a>	MAC - Part B	06202 - MAC B	N/A Minnesota
<a href="#">National Government Services, Inc.</a>	MAC - Part A	06301 - MAC A	N/A Wisconsin
<a href="#">National Government Services, Inc.</a>	MAC - Part B	06302 - MAC B	N/A Wisconsin
<a href="#">National Government Services, Inc.</a>	A and B and HHH MAC	13101 - MAC A	J - K Connecticut
<a href="#">National Government Services, Inc.</a>	A and B and HHH MAC	13102 - MAC B	J - K Connecticut
<a href="#">National Government Services, Inc.</a>	A and B and HHH MAC	13201 - MAC A	J - K New York - Entire State
<a href="#">National Government Services, Inc.</a>	A and B and HHH MAC	13202 - MAC B	J - K New York - Downstate
<a href="#">National Government Services, Inc.</a>	A and B and HHH MAC	13282 - MAC B	J - K New York - Upstate
<a href="#">National Government Services, Inc.</a>	A and B and HHH MAC	13292 - MAC B	J - K New York - Queens
<a href="#">National Government Services, Inc.</a>	A and B and HHH MAC	14111 - MAC A	J - K Maine
<a href="#">National Government Services, Inc.</a>	A and B and HHH MAC	14112 - MAC B	J - K Maine
<a href="#">National Government Services, Inc.</a>	A and B and HHH MAC	14211 - MAC A	J - K Massachusetts
<a href="#">National Government Services, Inc.</a>	A and B and HHH MAC	14212 - MAC B	J - K Massachusetts
<a href="#">National Government Services, Inc.</a>	A and B and HHH MAC	14311 - MAC A	J - K New Hampshire
<a href="#">National Government Services, Inc.</a>	A and B and HHH MAC	14312 - MAC B	J - K New Hampshire
<a href="#">National Government Services, Inc.</a>	A and B and HHH MAC	14411 - MAC A	J - K Rhode Island
<a href="#">National Government Services, Inc.</a>	A and B and HHH MAC	14412 - MAC B	J - K Rhode Island
<a href="#">National Government Services, Inc.</a>	A and B and HHH MAC	14511 - MAC A	J - K Vermont
<a href="#">National Government Services, Inc.</a>	A and B and HHH MAC	14512 - MAC B	J - K Vermont
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## LCD Information

### Document Information

LCD ID

Original Effective Date

LCD Title  
Cataract Extraction

Revision Effective Date  
For services performed on or after 11/01/2016

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CMS National Coverage Policy Language quoted from Centers for Medicare and Medicaid Services (CMS), National Coverage Determinations (NCDs) and coverage provisions in interpretive manuals is italicized throughout the policy. NCDs and coverage provisions in interpretive manuals are not subject to the Local Coverage Determination (LCD) Review Process (42 CFR 405.860[b] and 42 CFR 426 [Subpart D]). In addition, an administrative law judge may not review an NCD. See §1869(f)(1)(A)(i) of the Social Security Act.

Unless otherwise specified, *italicized* text represents quotation from one or more of the following CMS sources:

Title XVIII of the Social Security Act (SSA):

Section 1862(a)(1)(A) excludes expenses incurred for items or services which are not reasonable and necessary for the diagnosis or treatment of illness or injury or to improve the functioning of a malformed body member.

Section 1833(e) prohibits Medicare payment for any claim which lacks the necessary information to process the claim.

Code of Federal Regulations:

42 CFR Section 410.32 indicates that diagnostic tests may only be ordered by the treating physician (or other treating practitioner acting within the scope of his or her license and Medicare requirements who furnishes a consultation or treats a beneficiary for a specific medical problem and who uses the results in the management of the beneficiary's specific medical problem. Tests not ordered by the physician (or other qualified non-physician provider) who is treating the beneficiary are not reasonable and necessary (see Sec. 411.15(k)(1) of this chapter).

CMS Publications:

CMS Publication 100-02, *Medicare Benefit Policy Manual*, Chapter 15, Part 1:

10.1 Use of Visual Tests Prior to and General Anesthesia during Cataract Surgery

80.8 Endothelial Cell Photography

80.10 Phaco-Emulsification Procedure - Cataract Extraction

#### Coverage Guidance

#### **Coverage Indications, Limitations, and/or Medical Necessity**

##### **Abstract:**

A cataract is an opacity or cloudiness in the lens of the eye(s), blocking the passage of light through the lens, sometimes resulting in impaired vision. Cataract development occurs in 60% of adults 65 years of age or greater. There are multiple factors associated with cataract development. Some causes of cataracts may include: ultraviolet- $\beta$  radiation exposure, complications of diabetes, drug and/or alcohol use, smoking, and the natural process of aging. Medicare coverage for cataract extraction and cataract extraction with intraocular lens implant is based on services that are reasonable and medically necessary for the treatment of beneficiaries with cataract(s). This local coverage determination (LCD) defines coverage and describes criteria necessary to justify the performance of cataract extraction(s) or other select lensectomies.

##### **Indications and Limitations:**

Lens extraction is considered medically necessary and therefore covered by Medicare when one (or more) of the following conditions or circumstances exists:

- Cataract causing symptomatic (i.e., causing the patient to seek medical attention) impairment of visual function not correctable with a tolerable change in glasses or contact lenses resulting in specific activity limitations and/or participation restrictions including, but not limited to reading, viewing television, driving, or meeting vocational or recreational needs. Surgery is not deemed to be medically necessary purely on the basis of lens opacity in the absence of symptoms. Also other eye disease(s) including, but not limited to macular degeneration or diabetic retinopathy, have been ruled out as the primary cause of decreased visual function.
- Concomitant intraocular disease (e.g., diabetic retinopathy or intraocular tumor) requiring monitoring or treatment that is prevented by the presence of cataract.
- Cataract interfering with the performance of vitreoretinal surgery (e.g., performance of surgery for far peripheral vitreoretinal dissection and excision of the vitreous base, as in cases of proliferative vitreoretinopathy, complicated retinal detachments, and severe proliferative diabetic retinopathy).
- Lens-induced disease threatening vision or ocular health (including, but not limited to, phacomorphic or phacolytic glaucoma)
- High probability of accelerating cataract development as a result of a concomitant or subsequent procedure (e.g., pars plana vitrectomy, iridocyclectomy, procedure for ocular trauma) and treatments such as external beam irradiation
- Intolerable anisometropia or aniseikonia uncorrectable with glasses or contact lenses that exists as a result of lens extraction in the first eye (despite satisfactorily corrected monocular visual acuity).

##### **Visual Acuity**

The Snellen visual acuity chart is an excellent way of measuring distance refractive error (e.g. myopia, hyperopia, astigmatism) in healthy eyes, and is in wide clinical use. However, testing only with high contrast letters viewed in dark room conditions will underestimate the functional impairments caused by some cataracts in common real life situations such as day or nighttime glare conditions, poor contrast environments or reading, halos and starbursts at night, and impaired optical quality causing monocular diplopia and ghosting.

While a single arbitrary objective measure might be desirable a specific Snellen visual acuity alone can neither rule in, nor rule out the need for surgery. It should be recorded and considered in the context of the patient's

visual impairment and other ocular findings.

### **Bilateral Eye Surgery**

If the decision to perform cataract extraction in both eyes is made prior to the first cataract extraction, the documentation must support the medical necessity for each procedure to be performed. Prior to admitting to surgery on the second eye, the AAO Preferred Practice Pattern recommends that the patient and ophthalmologist should discuss the benefit, risk and timing of second-eye surgery when they have had the opportunity to evaluate the results of surgery on the first eye.

Immediate, sequential, bilateral surgery has advantages and disadvantages that must be carefully weighed and discussed by the surgeon and patient. Foremost is the risk of potentially blinding complications in both eyes. For this reason the second eye should be treated like the eye of a different patient using separate povidone iodine prepping, draping, instrumentation, and supplies such as irrigating solutions, OVD, and medications. According to the AAO Preferred Practice Pattern, "reported indications for immediate sequential bilateral cataract surgery include the need for general anesthesia in the presence of bilateral visually significant cataracts, rare occasions where travel for surgery and follow-up care is a significant hardship for the patient, and when the health of the patient may limit surgery to one surgical encounter."

### **Complex Cataract Surgery (CPT code 66982)**

The code for complex cataract surgery (CPT code 66982) is intended to differentiate the extraordinary work performed during the intraoperative or postoperative periods in a subset of cataract operations including, and not limited to, the following:

- A miotic pupil which will not dilate sufficiently to allow adequate visualization of the lens in the posterior chamber of the eye and which requires the insertion of four (4) iris retractors through four (4) additional incisions, use of an iris dilator device, a sector iridectomy with subsequent suture repair of iris sphincter, synechiolysis utilizing pupillary stretch maneuvers or sphincterotomies created with scissors.
- The presence of a disease state that produces lens support structures that are abnormally weak or absent. This requires the need to support the lens implant with permanent intraocular sutures and/or a capsular support ring (approved by the FDA) may be necessary to allow placement of an intraocular lens.
- Pediatric cataract surgery may be more difficult intraoperatively because of an anterior capsule which is more difficult to tear, cortex which is more difficult to remove, and the need for a primary posterior capsulotomy or capsulorhexis. Furthermore, there is additional postoperative work associated with pediatric cataract surgery.
- Extraordinary work may occur during the postoperative period. This is the case with pediatric cases mentioned above and very rarely when there is extreme postoperative inflammation and pain.

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## **Coding Information**

Bill Type Codes:

Contractors may specify Bill Types to help providers identify those Bill Types typically used to report this service. Absence of a Bill Type does not guarantee that the policy does not apply to that Bill Type. Complete absence of all Bill Types indicates that coverage is not influenced by Bill Type and the policy should be assumed to apply equally to all claims.

011x Hospital Inpatient (Including Medicare Part A)  
012x Hospital Inpatient (Medicare Part B only)  
013x Hospital Outpatient  
085x Critical Access Hospital

#### Revenue Codes:

Contractors may specify Revenue Codes to help providers identify those Revenue Codes typically used to report this service. In most instances Revenue Codes are purely advisory. Unless specified in the policy, services reported under other Revenue Codes are equally subject to this coverage determination. Complete absence of all Revenue Codes indicates that coverage is not influenced by Revenue Code and the policy should be assumed to apply equally to all Revenue Codes.

Revenue codes only apply to providers who bill these services to the Part A MAC. Revenue codes do not apply to physicians, other professionals and suppliers who bill these services to the Part B MAC.

Please note that not all revenue codes apply to every type of bill code. Providers are encouraged to refer to the FISS revenue code file for allowable bill types. Similarly, not all revenue codes apply to each CPT/HCPCS code. Providers are encouraged to refer to the FISS HCPCS file for allowable revenue codes.

All revenue codes billed on the inpatient claim for the dates of service in question may be subject to review.

036X Operating Room Services - General Classification  
037X Anesthesia - General Classification  
049X Ambulatory Surgical Care - General Classification  
0710 Recovery Room - General Classification  
076X Specialty Services - General Classification  
096X Professional Fees - General Classification

#### CPT/HCPCS Codes

**Group 1 Paragraph:** N/A

#### Group 1 Codes:

66840 REMOVAL OF LENS MATERIAL; ASPIRATION TECHNIQUE, 1 OR MORE STAGES  
66850 REMOVAL OF LENS MATERIAL; PHACOFRAGMENTATION TECHNIQUE (MECHANICAL OR ULTRASONIC) (EG, PHACOEMULSIFICATION), WITH ASPIRATION  
66852 REMOVAL OF LENS MATERIAL; PARS PLANA APPROACH, WITH OR WITHOUT VITRECTOMY  
66920 REMOVAL OF LENS MATERIAL; INTRACAPSULAR  
66930 REMOVAL OF LENS MATERIAL; INTRACAPSULAR, FOR DISLOCATED LENS  
66940 REMOVAL OF LENS MATERIAL; EXTRACAPSULAR (OTHER THAN 66840, 66850, 66852)  
EXTRACAPSULAR CATARACT REMOVAL WITH INSERTION OF INTRAOCULAR LENS PROSTHESIS (1-STAGE PROCEDURE), MANUAL OR MECHANICAL TECHNIQUE (EG, IRRIGATION AND ASPIRATION OR  
66982 PHACOEMULSIFICATION), COMPLEX, REQUIRING DEVICES OR TECHNIQUES NOT GENERALLY USED IN ROUTINE CATARACT SURGERY (EG, IRIS EXPANSION DEVICE, SUTURE SUPPORT FOR INTRAOCULAR LENS, OR PRIMARY POSTERIOR CAPSULORRHESIS) OR PERFORMED ON PATIENTS IN THE AMBLYOGENIC DEVELOPMENTAL STAGE  
66983 INTRACAPSULAR CATARACT EXTRACTION WITH INSERTION OF INTRAOCULAR LENS PROSTHESIS (1 STAGE PROCEDURE)  
EXTRACAPSULAR CATARACT REMOVAL WITH INSERTION OF INTRAOCULAR LENS PROSTHESIS (1 STAGE  
66984 PROCEDURE), MANUAL OR MECHANICAL TECHNIQUE (EG, IRRIGATION AND ASPIRATION OR PHACOEMULSIFICATION)

#### ICD-10 Codes that Support Medical Necessity

**Group 1 Paragraph:** The use of an ICD-10-CM codes listed below does not assure coverage of a service. The service must be reasonable and necessary in the specific case and must meet the criteria specified in this determination.

#### Group 1 Codes:

<b>ICD-10 Codes</b>	<b>Description</b>
E08.311	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy with macular edema
E08.319	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy without macular edema
E08.3211	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, right eye
E08.3212	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, left eye
E08.3213	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3291	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, right eye
E08.3292	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, left eye
E08.3293	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3311	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E08.3312	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E08.3313	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3391	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E08.3392	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E08.3393	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3411	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, right eye
E08.3412	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, left eye
E08.3413	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E08.3491	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, right eye
E08.3492	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, left eye
E08.3493	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E08.3511	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, right eye
E08.3512	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, left eye
E08.3513	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, bilateral
E08.3521	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
E08.3522	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
E08.3523	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
E08.3531	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
E08.3532	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
E08.3533	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
E08.3541	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
E08.3542	

ICD-10 Codes	Description
	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
E08.3543	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
E08.3551	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, right eye
E08.3552	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, left eye
E08.3553	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, bilateral
E08.3591	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, right eye
E08.3592	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, left eye
E08.3593	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, bilateral
E08.36	Diabetes mellitus due to underlying condition with diabetic cataract
E08.37X1	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, right eye
E08.37X2	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, left eye
E08.37X3	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, bilateral
E09.3211	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E09.3212	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E09.3213	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3291	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E09.3292	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E09.3293	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E09.3311	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E09.3312	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E09.3313	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3391	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E09.3392	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E09.3393	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E09.3411	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E09.3412	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E09.3413	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E09.3491	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E09.3492	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E09.3493	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E09.3511	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E09.3512	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E09.3513	

ICD-10 Codes	Description
	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E09.3521	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
E09.3522	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
E09.3523	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
E09.3531	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
E09.3532	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
E09.3533	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
E09.3541	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
E09.3542	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
E09.3543	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
E09.3551	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, right eye
E09.3552	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, left eye
E09.3553	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
E09.3591	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E09.3592	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E09.3593	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E09.36	Drug or chemical induced diabetes mellitus with diabetic cataract
E09.37X1	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
E09.37X2	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
E09.37X3	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
E10.311	Type 1 diabetes mellitus with unspecified diabetic retinopathy with macular edema
E10.3211	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E10.3212	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E10.3213	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3291	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E10.3292	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E10.3293	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3311	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E10.3312	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E10.3313	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3391	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E10.3392	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E10.3393	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3411	



ICD-10 Codes	Description
	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E10.3412	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E10.3413	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E10.3491	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E10.3492	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E10.3493	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E10.3511	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E10.3512	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E10.3513	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E10.3521	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
E10.3522	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
E10.3523	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
E10.3531	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
E10.3532	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
E10.3533	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
E10.3541	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
E10.3542	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
E10.3543	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
E10.3551	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, right eye
E10.3552	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, left eye
E10.3553	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
E10.3591	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E10.3592	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E10.3593	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E10.36	Type 1 diabetes mellitus with diabetic cataract
E10.37X1	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
E10.37X2	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
E10.37X3	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
E11.311	Type 2 diabetes mellitus with unspecified diabetic retinopathy with macular edema
E11.319	Type 2 diabetes mellitus with unspecified diabetic retinopathy without macular edema
E11.3211	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E11.3212	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E11.3213	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3291	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E11.3292	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E11.3293	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3311	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E11.3312	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye

ICD-10 Codes	Description
E11.3313	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3391	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E11.3392	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E11.3393	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3411	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E11.3412	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E11.3413	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E11.3491	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E11.3492	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E11.3493	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E11.3511	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E11.3512	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E11.3513	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E11.3521	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
E11.3522	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
E11.3523	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
E11.3531	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
E11.3532	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
E11.3533	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
E11.3541	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
E11.3542	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
E11.3543	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
E11.3551	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, right eye
E11.3552	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, left eye
E11.3553	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
E11.3591	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E11.3592	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E11.3593	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E11.36	Type 2 diabetes mellitus with diabetic cataract
E11.37X1	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
E11.37X2	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
E11.37X3	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
E13.311	Other specified diabetes mellitus with unspecified diabetic retinopathy with macular edema
E13.319	Other specified diabetes mellitus with unspecified diabetic retinopathy without macular edema
E13.3211	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye
E13.3212	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye
E13.3213	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3291	

ICD-10 Codes	Description
	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye
E13.3292	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye
E13.3293	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3311	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye
E13.3312	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye
E13.3313	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3391	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye
E13.3392	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye
E13.3393	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3411	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye
E13.3412	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye
E13.3413	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral
E13.3491	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye
E13.3492	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye
E13.3493	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral
E13.3511	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye
E13.3512	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye
E13.3513	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral
E13.3521	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye
E13.3522	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye
E13.3523	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral
E13.3531	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye
E13.3532	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye
E13.3533	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral
E13.3541	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye
E13.3542	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye
E13.3543	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral
E13.3551	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, right eye
E13.3552	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, left eye
E13.3553	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, bilateral
E13.3591	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye
E13.3592	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye
E13.3593	

ICD-10 Codes	Description
	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral
E13.36	Other specified diabetes mellitus with diabetic cataract
E13.37X1	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, right eye
E13.37X2	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, left eye
E13.37X3	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral
H20.21	Lens-induced iridocyclitis, right eye
H20.22	Lens-induced iridocyclitis, left eye
H25.011	Cortical age-related cataract, right eye
H25.012	Cortical age-related cataract, left eye
H25.013	Cortical age-related cataract, bilateral
H25.031	Anterior subcapsular polar age-related cataract, right eye
H25.032	Anterior subcapsular polar age-related cataract, left eye
H25.033	Anterior subcapsular polar age-related cataract, bilateral
H25.041	Posterior subcapsular polar age-related cataract, right eye
H25.042	Posterior subcapsular polar age-related cataract, left eye
H25.043	Posterior subcapsular polar age-related cataract, bilateral
H25.11	Age-related nuclear cataract, right eye
H25.12	Age-related nuclear cataract, left eye
H25.13	Age-related nuclear cataract, bilateral
H25.21	Age-related cataract, morgagnian type, right eye
H25.22	Age-related cataract, morgagnian type, left eye
H25.23	Age-related cataract, morgagnian type, bilateral
H25.811	Combined forms of age-related cataract, right eye
H25.812	Combined forms of age-related cataract, left eye
H25.813	Combined forms of age-related cataract, bilateral
H25.89	Other age-related cataract
H25.9	Unspecified age-related cataract
H26.001	Unspecified infantile and juvenile cataract, right eye
H26.002	Unspecified infantile and juvenile cataract, left eye
H26.003	Unspecified infantile and juvenile cataract, bilateral
H26.011	Infantile and juvenile cortical, lamellar, or zonular cataract, right eye
H26.012	Infantile and juvenile cortical, lamellar, or zonular cataract, left eye
H26.013	Infantile and juvenile cortical, lamellar, or zonular cataract, bilateral
H26.031	Infantile and juvenile nuclear cataract, right eye
H26.032	Infantile and juvenile nuclear cataract, left eye
H26.033	Infantile and juvenile nuclear cataract, bilateral
H26.041	Anterior subcapsular polar infantile and juvenile cataract, right eye
H26.042	Anterior subcapsular polar infantile and juvenile cataract, left eye
H26.043	Anterior subcapsular polar infantile and juvenile cataract, bilateral
H26.051	Posterior subcapsular polar infantile and juvenile cataract, right eye
H26.052	Posterior subcapsular polar infantile and juvenile cataract, left eye
H26.053	Posterior subcapsular polar infantile and juvenile cataract, bilateral
H26.061	Combined forms of infantile and juvenile cataract, right eye
H26.062	Combined forms of infantile and juvenile cataract, left eye
H26.063	Combined forms of infantile and juvenile cataract, bilateral
H26.09	Other infantile and juvenile cataract
H26.101	Unspecified traumatic cataract, right eye
H26.102	Unspecified traumatic cataract, left eye
H26.103	Unspecified traumatic cataract, bilateral
H26.111	Localized traumatic opacities, right eye
H26.112	Localized traumatic opacities, left eye
H26.113	Localized traumatic opacities, bilateral
H26.131	Total traumatic cataract, right eye
H26.132	Total traumatic cataract, left eye
H26.133	Total traumatic cataract, bilateral

<b>ICD-10 Codes</b>	<b>Description</b>
H26.20	Unspecified complicated cataract
H26.211	Cataract with neovascularization, right eye
H26.212	Cataract with neovascularization, left eye
H26.213	Cataract with neovascularization, bilateral
H26.221	Cataract secondary to ocular disorders (degenerative) (inflammatory), right eye
H26.222	Cataract secondary to ocular disorders (degenerative) (inflammatory), left eye
H26.223	Cataract secondary to ocular disorders (degenerative) (inflammatory), bilateral
H26.231	Glaucomatous flecks (subcapsular), right eye
H26.232	Glaucomatous flecks (subcapsular), left eye
H26.233	Glaucomatous flecks (subcapsular), bilateral
H26.31	Drug-induced cataract, right eye
H26.32	Drug-induced cataract, left eye
H26.33	Drug-induced cataract, bilateral
H26.491	Other secondary cataract, right eye
H26.492	Other secondary cataract, left eye
H26.493	Other secondary cataract, bilateral
H26.8	Other specified cataract
H26.9	Unspecified cataract
H27.111	Subluxation of lens, right eye
H27.112	Subluxation of lens, left eye
H27.113	Subluxation of lens, bilateral
H27.121	Anterior dislocation of lens, right eye
H27.122	Anterior dislocation of lens, left eye
H27.123	Anterior dislocation of lens, bilateral
H27.131	Posterior dislocation of lens, right eye
H27.132	Posterior dislocation of lens, left eye
H27.133	Posterior dislocation of lens, bilateral
H27.9	Unspecified disorder of lens
H33.001	Unspecified retinal detachment with retinal break, right eye
H33.002	Unspecified retinal detachment with retinal break, left eye
H33.003	Unspecified retinal detachment with retinal break, bilateral
H33.011	Retinal detachment with single break, right eye
H33.012	Retinal detachment with single break, left eye
H33.013	Retinal detachment with single break, bilateral
H33.021	Retinal detachment with multiple breaks, right eye
H33.022	Retinal detachment with multiple breaks, left eye
H33.023	Retinal detachment with multiple breaks, bilateral
H33.031	Retinal detachment with giant retinal tear, right eye
H33.032	Retinal detachment with giant retinal tear, left eye
H33.033	Retinal detachment with giant retinal tear, bilateral
H33.041	Retinal detachment with retinal dialysis, right eye
H33.042	Retinal detachment with retinal dialysis, left eye
H33.043	Retinal detachment with retinal dialysis, bilateral
H33.051	Total retinal detachment, right eye
H33.052	Total retinal detachment, left eye
H33.053	Total retinal detachment, bilateral
H33.41	Traction detachment of retina, right eye
H33.42	Traction detachment of retina, left eye
H33.43	Traction detachment of retina, bilateral
H33.8	Other retinal detachments
H35.041	Retinal micro-aneurysms, unspecified, right eye
H35.042	Retinal micro-aneurysms, unspecified, left eye
H35.043	Retinal micro-aneurysms, unspecified, bilateral
H35.071	Retinal telangiectasis, right eye
H35.072	Retinal telangiectasis, left eye
H35.073	Retinal telangiectasis, bilateral
H35.21	Other non-diabetic proliferative retinopathy, right eye
H35.22	Other non-diabetic proliferative retinopathy, left eye

<b>ICD-10 Codes</b>	<b>Description</b>
H35.23	Other non-diabetic proliferative retinopathy, bilateral
H35.3230	Exudative age-related macular degeneration, bilateral, stage unspecified
H35.3231	Exudative age-related macular degeneration, bilateral, with active choroidal neovascularization
H35.3232	Exudative age-related macular degeneration, bilateral, with inactive choroidal neovascularization
H35.3233	Exudative age-related macular degeneration, bilateral, with inactive scar
H35.341	Macular cyst, hole, or pseudohole, right eye
H35.342	Macular cyst, hole, or pseudohole, left eye
H35.343	Macular cyst, hole, or pseudohole, bilateral
H35.371	Puckering of macula, right eye
H35.372	Puckering of macula, left eye
H35.373	Puckering of macula, bilateral
H35.81	Retinal edema
H40.89	Other specified glaucoma
H40.9	Unspecified glaucoma
H43.11	Vitreous hemorrhage, right eye
H43.12	Vitreous hemorrhage, left eye
H43.13	Vitreous hemorrhage, bilateral
H52.31	Anisometropia
H59.021	Cataract (lens) fragments in eye following cataract surgery, right eye
H59.022	Cataract (lens) fragments in eye following cataract surgery, left eye
H59.023	Cataract (lens) fragments in eye following cataract surgery, bilateral
Q12.0	Congenital cataract
Q12.1	Congenital displaced lens
Q12.2	Coloboma of lens
Q12.3	Congenital aphakia
Q12.4	Spherophakia
Q12.8	Other congenital lens malformations
Q12.9	Congenital lens malformation, unspecified

**Group 2 Paragraph:** For CPT code 66982, in addition to reporting one of the ICD-10-CM diagnosis codes in Group 1, listed above, the appropriate ICD-10-CM code(s) from the ICD-10-CM diagnosis codes in Group 2, listed below, should be reported, if applicable.

**Group 2 Codes:**

<b>ICD-10 Codes</b>	<b>Description</b>
H21.221	Degeneration of ciliary body, right eye
H21.222	Degeneration of ciliary body, left eye
H21.223	Degeneration of ciliary body, bilateral
H21.261	Iris atrophy (essential) (progressive), right eye
H21.262	Iris atrophy (essential) (progressive), left eye
H21.263	Iris atrophy (essential) (progressive), bilateral
H21.271	Miotic pupillary cyst, right eye
H21.272	Miotic pupillary cyst, left eye
H21.273	Miotic pupillary cyst, bilateral
H21.29	Other iris atrophy
H21.531	Iridodialysis, right eye
H21.532	Iridodialysis, left eye
H21.533	Iridodialysis, bilateral
H21.561	Pupillary abnormality, right eye
H21.562	Pupillary abnormality, left eye
H21.563	Pupillary abnormality, bilateral
H21.81	Floppy iris syndrome
H21.82	Plateau iris syndrome (post-iridectomy) (postprocedural)
H21.89	Other specified disorders of iris and ciliary body
H21.9	Unspecified disorder of iris and ciliary body

ICD-10 Codes	Description
H22	Disorders of iris and ciliary body in diseases classified elsewhere
H25.89*	Other age-related cataract
H43.821	Vitreomacular adhesion, right eye
H43.822	Vitreomacular adhesion, left eye
H43.823	Vitreomacular adhesion, bilateral
H57.00	Unspecified anomaly of pupillary function
H57.01	Argyll Robertson pupil, atypical
H57.02	Anisocoria
H57.03	Miosis
H57.04	Mydriasis
H57.051	Tonic pupil, right eye
H57.052	Tonic pupil, left eye
H57.053	Tonic pupil, bilateral
H57.09	Other anomalies of pupillary function
H57.9	Unspecified disorder of eye and adnexa
Q13.1	Absence of iris
Q13.9	Congenital malformation of anterior segment of eye, unspecified

**Group 2 Medical Necessity ICD-10 Codes Asterisk Explanation:** \*H25.89 may be used if the operative note indicates dye was used to stain the anterior capsule.

ICD-10 Codes that DO NOT Support Medical Necessity N/A

ICD-10 Additional Information

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## General Information

Associated Information

### **Documentation Requirements:**

The patient's medical record must contain documentation that fully supports the medical necessity for services included within this LCD. (See "Indications and Limitations of Coverage.") This documentation includes, but is not limited to, relevant medical history, physical examination, and results of pertinent diagnostic tests or procedures. The medical record and/or test results documenting medical necessity should be maintained and made available on request.

If cataract extraction is performed due to anisometropia, the medical record must substantiate the presence of significant aniseikonia secondary to anisometropia arising from the first cataract extraction with IOL implant. The medical record must reflect that the aniseikonia is visually significant to the patient by documenting the patient's subjective complaints and must also document that anisometropia is present by determination of the refractive error in both eyes after the first cataract surgery.

If cataract extraction is performed in order to visualize the fundus, the disease being treated must appear in the medical record, and the necessity for visualization must be described in the medical record.

For CPT code 66982, complex cataract extraction, to be reasonable and necessary, the procedure should require devices or techniques not generally used in routine cataract surgery. Please see examples below:

- The operative note indicates that a permanent intraocular suture or a capsular support ring was employed to place the intraocular lens in a stable position.
- The operative note indicates a capsular support ring was employed or an endocapsular support ring was used.

- The operative note indicates the use of micro iris hooks inserted through four (4) or more separate cornea incisions, use of an iris dilator device, synechiolysis utilizing pupillary stretch maneuvers creation of multiple sphincterotomies with scissors, a sector iridotomy with suture repair of iris sphincter was performed, or a permanent intraocular suture, capsular support ring, or endocapsular support ring was used.
- The operative note indicates dye was used to stain the anterior capsule.
- The operative note indicates Phacolytic glaucoma
- The operative note indicates a primary posterior capsulorhexis was performed
- The operative note or postoperative records indicate an extraordinary amount of work was involved in the preoperative or postoperative care.
- The operative note indicates an artificial prosthetic iris was placed in the eye.

#### Sources of Information and Basis for Decision

This bibliography presents those sources that were obtained during the development of this policy. National Government Services is not responsible for the continuing viability of Web site addresses listed below.

American Academy of Ophthalmology Cataract and Anterior Segment Panel. Preferred Practice Pattern® Guidelines. Cataract in the Adult Eye. San Francisco, CA: American Academy of Ophthalmology; 2011. Available at: [www.aao.org/ppp](http://www.aao.org/ppp). Accessed 3/24/2016.

Other Medicare Contractor LCDs especially Wheatlands Administrative Services, Inc. (L22215 – Complex Cataract Surgery) [Back to Top](#)

## Revision History Information

Revision History Date	Revision History Number	Revision History Explanation	Reason(s) for Change
11/01/2016	R8	ICD-10-CM code H25.89* and an explanatory note "*H25.89 may be used if the operative note indicates dye was used to stain the anterior capsule." were added to ICD-10 Codes that Support Medical Necessity section, Group 2, effective for services rendered on or after 10/01/2016.	• Provider Education/Guidance
11/01/2016	R7	Added the following ICD-10-CM codes to the ICD-10 Codes that Support Medical Necessity section during the notice period, effective for services rendered on or after 10/1/2016: Group1- H25.013, H25.033, H25.043, H25.23, H25.813, H26.003, H26.013, H26.033, H26.043, H26.053, H26.063, H26.103, H26.113, H26.133, H26.213, H26.223, H26.233, H26.33, H26.493, H27.113, H27.123, H27.133, H33.003, H33.013, H33.023, H33.033, H33.043, H33.053, H33.43, H35.043, H35.073, H35.073, H35.23, H35.343, H35.373, H43.13, H59.023. Group 2- H21.223, H21.263, H21.533, H21.563, H21.82, H43.823, H57.053.	• Revisions Due To ICD-10-CM Code Changes
11/01/2016	R6	Under the Indications and Limitations of Coverage section, simplified and clarified criteria by eliminating generalized statements and by eliminating the explicit Snellen metric requirement.	• Provider Education/Guidance
		Under the Documentation Requirements section related to CPT code 66982:	



Revision History Date	Revision History Number	Revision History Explanation	Reason(s) for Change
		<ul style="list-style-type: none"> <li>- deleted bullet #1</li> <li>- deleted the wording, "for partial occlusion of the pupil" in bullets #3 and 4</li> <li>- added the wording, "or more", related to cornea incisions in bullet #3 that provides examples of devices or techniques considered reasonable and necessary when rendering complex cataract extraction (CPT code 66982).</li> </ul>	
10/01/2015	R5	Added multiple 2017 ICD-10-CM diagnosis codes to Group 1. Added ICD-10-CM diagnosis code H25.13 to the Group 1 ICD-10 Codes that Support Medical Necessity section, effective for services rendered on or after 10/01/2015.	<ul style="list-style-type: none"> <li>• Request for Coverage by a Practitioner (Part B)</li> </ul>
10/01/2015	R4	LCD updated to reflect administrative changes.	<ul style="list-style-type: none"> <li>• Provider Education/Guidance</li> </ul>
10/01/2015	R3	Corrected typographical error in Indications of Coverage section	<ul style="list-style-type: none"> <li>• Typographical Error</li> </ul>
10/01/2015	R2	Added the following language to the Indications and Limitations of Coverage section: "Immediate, sequential, bilateral surgery has advantages and disadvantages that must be carefully weighed and discussed by the surgeon and patient. Foremost is the risk of potentially blinding complications in both eyes. For this reason the second eye should be treated like the eye of a different patient using separate povidone iodine prepping, draping, instrumentation, and supplies such as irrigating solutions, OVD, and medications."	<ul style="list-style-type: none"> <li>• Provider Education/Guidance</li> </ul>
10/01/2015	R1	Deleted the following language from the Indications and Limitations of Coverage section: "Bilateral cataract extraction should not be performed on both eyes on the same day because of the potential for bilateral visual loss. If the first cataract extraction is performed and a subsequent contralateral cataract extraction is considered, the criteria for coverage of the procedure in the contralateral eye are the same as the criteria for the first cataract extraction."  Added the following language to the Indications and Limitations of Coverage section: "Immediate, sequential, bilateral surgery has advantages and disadvantages that must be carefully weighed and discussed by the surgeon and patient. Foremost is the risk of potentially blinding complications in both eyes. For this reason the second eye should be treated like the eye of a different patient using separate povidone iodine prepping, draping, instrumentation, and supplies such as irrigating solutions, OVD, and medications."	<ul style="list-style-type: none"> <li>• Provider Education/Guidance</li> </ul>

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## Associated Documents

Attachments N/A

Related Local Coverage Documents Article(s) [A55257 - Response to Comments: Cataract Extraction](#)

Related National Coverage Documents N/A

Public Version(s) Updated on 03/07/2017 with effective dates 11/01/2016 - N/A [Updated on 10/23/2016 with effective dates 11/01/2016 - N/A Updated on 09/09/2016 with effective dates 11/01/2016 - N/A Updated on 02/18/2016 with effective dates 10/01/2015 - 10/31/2016 Updated on 09/17/2015 with effective dates 10/01/2015 - N/A Updated on 02/24/2015 with effective dates 10/01/2015 - N/A Updated on 11/03/2014 with](#)

## **Keywords**

- eye
- ophthalmology
- complex cataract
- epinephrine

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