

# Cataract surgery and Intraocular lens (IOL) Adjudication Guideline

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Medical

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## 1. Abstract

### 1.1 For Members

- A cataract is a cloudy or opaque area in the normally clear lens of the eye. Depending upon its size and location, it can interfere with normal vision. Most cataracts develop in people over age 55, but they occasionally occur in infants and young children. Cataracts generally form very slowly. Signs and symptoms of a cataract may include:
  - Blurred or hazy vision
  - Reduced intensity of colours
  - Increased sensitivity to glare from lights, particularly when driving at night
  - Increased difficulty seeing at night
  - Change in the eye's refractive error

### 1.2 For Medical Professionals

- A cataract is an opacity of the lens of the eye that may cause blurred or distorted vision, glare problems, or, in very late stages, blindness. There are no proven medical therapies for cataract. Surgery is indicated when cataract formation has reduced visual acuity to the level that it interferes with the patient's lifestyle and everyday activities, and when satisfactory functional vision cannot be obtained with spectacles, contact lenses, or other optical aids. The vision needs of the patient, as they relate to his or her lifestyle, occupation, and hobbies, should be considered. Therefore, modern microsurgical technique combined with intraocular lens implantation can restore normal vision in most patients. It should be stressed that the following are the types of surgeries such as:
  - Phacoemulsification
  - Intracapsular cataract extraction (ICCE)
  - Extracapsular cataract extraction (ECCE).
  - Laser (Femto)

## 2. Scope

- This Adjudication Rule highlights the coverage and payment requirements of Cataract surgery and Intraocular lens (IOL) by Daman as per policy terms and conditions.

## 3. Adjudication Policy

### 3.1 Eligibility / Coverage Criteria

- Presence of a cataract in most circumstances will not affect the health of the eye. Treatment is indicated if:
  - Cataract is causing other ocular diseases.
  - Opacification is sufficiently dense, despite best-spectacle correction, to cause functional impairment of the patient's vision and negatively affect their lifestyle.
- **Eligible clinician specialties:** Ophthalmologist

### 3.2 Requirements for Coverage

- ICD and CPT codes must be coded to the highest level of specificity.
- Failure to submit, upon request or when requesting a clinical history, indication the need for testing will result in rejection of claim.

### 3.3 Non-Coverage

- Cataract surgery and Intraocular lens (IOL) are not covered for visitors plan as per policy terms and conditions.
- Monofocal covered for all plans (including basic), whereas multifocal (bi and trifocal) lenses are covered only for plans with refraction benefit.

### 3.4 Payment and Coding Rules

- Please apply Regulator payment rules and regulations and relevant coding manuals for ICD, CPT.

## 4. Denial Codes

Code	Code Description
MNEC-003	Service is not clinically indicated based on good clinical practice
MNEC-004	Service is not clinically indicated based on good clinical practice, without additional supporting diagnoses/activities
MNEC-005	Service /supply may be appropriate , but too frequent
NCOV-003	Service(s) is (are) not covered
AUTH-001	Prior approval is required and was not obtained
Code-10	Activity/diagnosis inconsistent with clinician speciality

## 5. Appendices

### 5.1 References

- [https://www.uptodate.com/contents/cataract-in-adults?search=cataract&source=search\\_result&selectedTitle=1%7E150&usage\\_type=default&display\\_rank=1#H196361765](https://www.uptodate.com/contents/cataract-in-adults?search=cataract&source=search_result&selectedTitle=1%7E150&usage_type=default&display_rank=1#H196361765)
- <https://www.aoa.org/AOA/Documents/Practice%20Management/Clinical%20Guidelines/Consensus-based%20guidelines/Care%20of%20the%20Adult%20Patient%20with%20Cataract.pdf>
- <https://www.aao.org/eye-health/treatments/femtosecond-laser-assisted-cataract-surgery>
- <https://www.nice.org.uk/guidance/ng77/chapter/Recommendations#surgical-timing-and-technique>

### 5.2 Revision History

Date	Change(s)
12/07/2018	V1.0 <ul style="list-style-type: none"> <li>• Published</li> </ul>
31/12/2024	V2.0 <ul style="list-style-type: none"> <li>• Reviewed as per the system requirement</li> <li>• Content updated</li> <li>• References Updated</li> </ul>

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