

February 2024

Dear eye care professional,

Thank you for your participation in the Versant Health panel of eye care professionals. As part of our ongoing commitment to open lines of communication, we are sending this letter to inform you of updates and additional clinical policies recently approved by the Versant Health Medical Policy Council.

The following clinical policies have been added or updated with effective dates as noted.

Policy Number	Policy Name	Criteria Changes	Effective Date
1300	Cataract Surgery	Removed requirement to <i>predict</i> patient's ADL improvements; removed criteria for bilateral sequential surgery - if two separate dates of surgery are requested then each eye will be evaluated as individual surgeries.	4/1/2024
1301	Eyelid and Brow Surgery	Added ectropion/entropion repair procedures with indications.	4/1/2024
1310	Refraction	Annual review; no criteria changes.	4/1/2024
1311	Adult Strabismus Surgery	Clarify criteria to improve single binocular vision in both esotropia and exotropia. Added indication to optimize null point with nystagmus.	4/1/2024
1312	Amniotic Membrane	No criteria changes; add new materials Q4280 Xcell Amnio Matrix and Q4283 Biovance Tri-Layer or Biovance.	5/1/2024
1313	Retinal Angiography	Added indications: macular edema, need to identify ischemia, neovascularization, need to locate microaneurysms, and central serous chorioretinopathy.	4/1/2024
1314	Corneal Topography	Clarify indication for adjunctive medically necessary contact lens fitting.	4/1/2024
1315	Keratoplasty and Keratectomy (Corneal Transplantation)	Added procedure of Descemet stripping (DSO) for Fuchs' dystrophy and designated use of 66999 procedure code for DSO.	5/1/2024
1317	Vascular Endothelial Growth Factor Inhibitors (Anti-VEGF)	Add new drugs: Eylea HD and 3 new Avastin biosimilars. Added indications: Eylea HD: DME, exudative AMD, Diabetic retinopathy. Vabysmo/Eylea: macular edema due to RVO.	5/1/2024
1343	Durysta (implant)	Added indication for ocular hypertension, ocular surface disease, poor compliance/intolerance to topical therapy.	5/1/2024

1346	Corticosteroid Implants and Injections	Removed indication of DME for Yutiq; added CPT code 67516 suprachoroidal space injection for Xipere.	5/1/2024
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The following changes have been made to the Prior Authorization (PA) list requiring prospective review.

Related Policy	Code Changes	Change Effective Date
1346 - Corticosteroid Implants and Injections	Added CPT code 67516 suprachoroidal space injection for Xipere.	5/1/2024

Versant Health, which brings you the Superior Vision network and the Davis Vision network, maintains and provides access to our policies which can be accessed via the Eye Care Professional Portal located at **ecp.versanthealth.com**. The medical policies can be found by selecting "Health Plans" and then "Medical Management" from the left side navigation bar on the portal home page. Additionally, the most current Prior Authorization list can be found in the same location.

We greatly appreciate the professional services which you render to our members. Thank you for being a part of the Versant Health network of eye care professionals.

Sincerely,

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Neelam Gor, MD Chief Clinical Officer

Disclaimer: Versant Health, Inc.'s and each of its subsidiaries' (together, "Versant's") policies and procedures ("P&Ps") are confidential and proprietary and are subject to change at any time. These P&Ps are not all-inclusive, but contain general information that applies to many, but not all, employer group health plans administered by Versant. Versant's P&Ps provide important information for its in-network eye care providers and are contractually binding for compliance, based on each provider's agreement. These P&Ps are internal guidelines relating to Versant's role as an administrator for payors of vision benefit claims. These P&Ps are not intended to dictate medical care decisions, and they do not and should not be interpreted as a substitute or replacement for a treating physician's prudent clinical judgment at the time vision services are delivered to a patient.

