Current Effective Date: 5/1/25
Status: Approved
Reviewed by Medical Policy Subcommittee: 5/1/25
Reviewed Dates: 4/8/25

INSTRUCTIONS FOR USE DISCLAIMER:
SummaCare posts policies relating to coverage and medical necessity issues to assist members and providers in administering member benefits. These policies do not constitute a contract or agreement between SummaCare and any member or provider. The policies are guidelines only and are intended to assist members and providers with coverage issues. SummaCare is not a health care provider, does not provide or assist with health care services or treatment, and does not make guarantees as to the effectiveness of treatment administered by providers. The treatment of members is the sole responsibility of the treating provider, who is not an employee of SummaCare, but is an independent contractor in private practice. The policies posted to this site may be updated and are subject to change without prior notice to members or providers.

Medical policies in conjunction with other nationally recognized standards of care are used to make medical coverage decisions.

Ophthalmology Procedures Policy

Indication/Usage:

The following ophthalmologic procedures are generally performed in an outpatient setting when medical necessity criteria is met.

Medical Indications for Authorization
Commercial and Medicare Members

1. Placement of amniotic membrane on the ocular surface; without sutures CPT code 65778

CPT 65778 refers medical procedure involving the placement of amniotic membrane on the ocular surface without the use of sutures. This is used to treat various ocular surface disorders, including corneal ulcers, chemical burns, and other ocular conditions that compromise the integrity of the eye's surface. The amniotic membrane acts as a biological bandage that looks a contact lens, providing a protective layer that promotes healing while minimizing discomfort

SummaCare considers human amniotic membrane transplantation without suture is considered medically necessary for the treatment of the following ophthalmic indications when conservative therapy (examples artificial tears, antibiotic, steroid eye drops) has failed :

- Neurotrophic keratitis with ocular surface damage and inflammation
- Corneal ulcers and melts
- Corneal perforation when there is active inflammation after corneal transplant
- Bullous keratopathy in members who are not candidates for curative treatment
- Partial limbal stem cell deficiency with extensive diseased tissue where selective removal alone is not sufficient
- Moderate or severe Stevens-Johnson syndrome
- Persistent epithelial defects
- Severe dry eye with ocular surface damage and inflammation
- Moderate or severe acute ocular chemical burn

Note - More than 3 applications of any human amniotic membrane graft for ophthalmic indications is considered not medically necessary.

There are currently no NCD or LCD per CMS

2. Treatment Of Retinal Lesion CPT code 67218

CPT code 67218 is used for a specialized procedure aimed at treating localized lesions within the retina, particularly cancerous lesions. Plaque brachytherapy is a radioactive source is implanted directly onto or near the tumor. This targeted approach allows for high doses of radiation to be delivered precisely to the tumor while sparing adjacent healthy retinal tissue. This CPT code is also used for removal of the radioactive source.

SummaCare considers transpupillary thermal therapy medically necessary for one of the following indications:

- Retinoblastoma involving less than 50 % of the retina, without vitreal or sub-retinal seeds
- Small (measuring 2 to 3 mm) choroidal melanomas located posterior in the globe

There are currently no NCD or LCD per CMS

3. Repair of Retinal Detachment CPT code 67108

CPT code 67108 Repair of retinal detachment; with vitrectomy, any method, including, when performed, air or gas tamponade, focal endolaser photocoagulation, cryotherapy, drainage of subretinal fluid, scleral buckling, and/or removal of lens by same technique. This procedure is vital for patients suffering from retinal detachment. The purpose of this code is to encapsulate the various techniques that may be utilized during the surgery, each of these methods plays a role in ensuring the retina is reattached securely and functions properly.

SummaCare considers Repair of Retinal Detachment with vitrectomy CPT 67108 medically necessary when 1 of the following criteria below has been met:

- With proliferative vitreoretinopathy
- With choroidal detachment
- Retinal breaks posterior to the equator
- Macular holes
- With cytomegalovirus (CMV) retinitis
- With giant retinal tear (> 3 clock hours)

Limitations

CPT codes 65778, 67218 and 67108 used for any other indication not listed the above criteria is considered experimental/investigational because the safety and/or effectiveness of those service has not be established.

Coverage Decisions

Coverage decisions made per CMS, Hayes and industry standards research

Plans Covered By This Policy

Commercial and Medicare
Self-funded Commercial groups refer to plan document for coverage

Sources Reviewed

How To Use CPT Code 65778 - Updated 2025 - Coding Ahead

How To Use CPT Code 67218 - Updated 2025 - Coding Ahead

Altiparmak UE, Oflu Y, Yildiz EH, et al. Prospective comparison of two suturing techniques of amniotic membrane transplantation for symptomatic bullous keratopathy. Am J Ophthalmol. 2009; 147(3):442-446.

Bamberger MD, Felfeli T, Politis M, et al. Human amniotic membrane plug for chronic or persistent macular holes. Ophthalmol Retina. 2022; 6(5):431-433.

Brocks D, Mead OG, Tighe S, Tseng SCG. Self-retained cryopreserved amniotic membrane for the management of corneal ulcers. Clin Ophthalmol. 2020; 14:1437-1443.

Bulut O, Musayeva G, Selver OB, et al. Impact of adjuvant amniotic membrane transplantation in infectious ulcerative keratitis. Int Ophthalmol. 2023; 43(3):915-923.

Dahrouj M, Gong DA. Retinal detachment. UpToDate [online serial]. Waltham, MA: UpToDate; reviewed May 2024.

Eshtiaghi A, Dhoot AS, Mihalache A, et al. Pars plana vitrectomy with and without supplemental scleral buckle for the repair of rhegmatogenous retinal detachment: A meta-analysis. Ophthalmol Retina. 2022;6(10):871-885.

Fan S, Lin D, Wang Y, et al. Role of prophylactic vitrectomy in acute retinal necrosis in preventing rhegmatogenous retinal detachment: Systematic review and meta-analysis. Ocul Immunol Inflamm. 2022; 30(2):515-519.

Finger PT. Transpupillary thermotherapy in choroidal melanoma [letter; comment]. Ophthalmology. 1997; 104(5):731-732.

Gunduz AK, Mirzayev I, Tetik D, Ateş FSO. Circumscribed choroidal hemangioma: Comparative efficacy of transpupillary thermotherapy, indocyanine green-enhanced transpupillary thermotherapy, and photodynamic therapy and analysis of baseline clinical features effecting treatment outcomes. Photodiagnosis Photodyn Ther. 2021; 36:102529.

Hajjaj A, van Overdam KA, Gishti O, et al. Efficacy and safety of current treatment options for peripheral retinal haemangioblastomas: A systematic review. Acta Ophthalmol. 2022; 100(1):e38-e46.

Huang Y-H, Tsai D-C, Wang L-C, Chen S-J. Comparison between cryopreserved and dehydrated human amniotic membrane graft in treating challenging cases with macular hole and macular hole retinal detachment. J Ophthalmol. 2020; 2020:9157518.

Pacini B, Bacherini D, Savastano A, et al. Comparative analysis of macular microstructure in eyes treated with human amniotic membrane plug or internal limiting membrane transplant for failed macular hole. Acta Ophthalmol. 2022; 100(4):e1031-e1035.

Patil M, Mehta JS. Long term outcomes of surgical excision of giant papillae with mitomycin C and amniotic membrane transplantation in the treatment of refractory palpebral vernal keratoconjunctivitis. Medicina (Kaunas). 2021; 58(1):19.

Shah R, Byanju R, Pradhan S. Outcomes of silicone oil removal in complex retinal detachment. Nepal J Ophthalmol. 2018; 10(20):124-129.

Souto EB, Zielinska A, Luis M, et al. Uveal melanoma: Physiopathology and new in situ-specific therapies. Cancer Chemother Pharmacol. 2019; 84(1):15-32.

CMS MCD Search

Hayes Knowledge Center | symplr