

Corneal Cross-Linking

Table of Content

[Purpose](#)
[Description & Definitions](#)
[Criteria](#)
[Coding](#)
[Document History](#)
[References](#)
[Special Notes](#)
[Keywords](#)

[Effective Date](#) 6/1992
[Next Review Date](#) 1/2024
[Coverage Policy](#) Medical 264
[Version](#) 4

Member-specific benefits take precedence over medical policy and benefits may vary across plans. Refer to the individual's benefit plan for details ^{*}.

Purpose:

This policy addresses the medical necessity of - Corneal Cross-Linking.

Description & Definitions:

Corneal cross-linking is a minimally-invasive procedure to build up the cornea if it has been damaged by keratoconus or other diseases using collagen and ultraviolet A (UVA) light to bond.

Criteria:

Corneal collagen cross-linkage using riboflavin and ultraviolet A is considered medically necessary for treatment of individuals with **1 or more** of the following:

- Progressive keratoconus
- Corneal ectasia after refractive surgery in individuals who have failed conservative treatment (eg. optometric correction, rigid contact lens)

Corneal Cross-Linking is considered not medically necessary for any use other than those indicated in clinical criteria.

Coding:

Medically necessary with criteria:

Coding	Description
0402T	Collagen cross-linking of cornea, including removal of the corneal epithelium and intraoperative pachymetry, when performed (Report medication separately).

Considered Not Medically Necessary:

Coding	Description
	None

Document History:

Revised Dates:

- 2020: January
- 2016: February
- 2015: March
- 2014: February
- 2012: March, April, May
- 2010: February
- 2009: February
- 2008: May
- 2005: October
- 1998: February, October
- 1994: February

Reviewed Dates:

- 2023: January
- 2022: January
- 2021: January
- 2018: February
- 2017: December
- 2015: February
- 2013: February
- 2012: February
- 2011: February
- 2007: December
- 2004: October
- 2003: October, November
- 2002: October
- 2001: November
- 2000: November
- 1999: November
- 1996: February

Effective Date:

- June 1992

References:

Specialty Association Guidelines; Government Regulations; Winifred S. Hayes, Inc; UpToDate; Literature Review; Specialty Advisors; National Coverage Determination (NCD); Local Coverage Determination (LCD).

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Conventional Corneal Collagen Cross-Linking for Treatment Of LASIK-Related Ectasia - Apr 21, 2021. (n.d.). Retrieved Dec 28, 2021, from Hayes 2: <https://evidence.hayesinc.com/report/dir.cornealcollagen4277>

Special Notes: *

Medical policies can be highly technical and complex and are provided here for informational purposes. These medical policies are intended for use by health care professionals. The medical policies do not constitute medical advice or medical care. Treating health care professionals are solely responsible for diagnosis, treatment, and medical advice. Sentara Health Plan members should discuss the information in the medical policies with their treating health care professionals. Medical technology is constantly evolving, and these medical policies are subject to change without notice, although Sentara Health Plan will notify providers as required in advance of changes that could have a negative impact on benefits.

Services mean both medical and behavioral health (mental health) services and supplies unless We specifically tell You otherwise. We do not cover any services that are not listed in the Covered Services section unless required to be covered under state or federal laws and regulations. We do not cover any services that are not Medically Necessary. We sometimes give examples of specific services that are not covered but that does not mean that other similar services are covered. Some services are covered only if We authorize them. When We say You or Your We mean You and any of Your family members covered under the Plan. Call Member Services if You have questions.

Keywords:

SHP Corneal Cross-Linking, SHP Medical 264, SHP Medical 03, SHP Medical 3, Keratoconus Lenses and Interventions, Piggyback Contact Lenses, Keratoconus, Keratectasia, ultraviolet, riboflavin, corneal cross-linking, CXL, epithelium-off, Conventional, C-CXL, Dresden protocol, Transepithelial Crosslinking, T-CXL, Iontophoresis-assisted Crosslinking, I-CXL, Lenticule-assisted Crosslinking, Contact lens-assisted Crosslinking, CACXL, Individualized Corneal Crosslinking, Keratoconus treatment