

Medical Policy

Policy: 200504

SUBJECT: Intrastromal Corneal Ring Segments -
Keratoconus

Effective Date: 07/08/2025

Annual Review Date: 06/12/2025

Last Revised Date: 06/12/2025

Prior approval is required for all procedure codes listed in this Corporate Medical Policy.

Definition: Intrastromal corneal ring segments (ICRS) (e.g., Intacs Corneal Implants, Addition Technology) are removable inserts indicated for reduction or elimination of myopia and astigmatism due to keratoconus when adequate vision is no longer achieved with eyeglasses or contact lenses. The device consists of two thin, clear, arc-shaped segments designed to reshape the anterior surface of the cornea. The segments are surgically inserted into the peripheral corneal stroma to flatten the central cornea. ICRS are suggested to improve vision and potentially defer the need for a corneal transplant.

Keratoconus is a progressive, noninflammatory, degenerative eye disease in which structural changes within the cornea cause it to thin and steepen, leading to progressive myopia, astigmatism, and visual impairment.

Medical Necessity: The Company considers ICRS (CPT Code 65785 and HCPCS Code L8610) medically necessary and eligible for reimbursement providing that *all* of the following medical criteria are met:

- Age \geq 21 years; and
- Myopia and astigmatism due to keratoconus; and
- Progressive deterioration of vision; and
- Inability to perform activities of daily living due to keratoconus-induced visual impairment; and
- Eyeglasses and contact lenses are no longer able to correct vision to 20/40 or better; and
- Central cornea is clear; and
- Intrastromal corneal ring segments would improve vision and reduce or eliminate myopia and astigmatism; and
- Corneal thickness \geq 450 microns at the proposed incision site; and
- Implantation will delay or eliminate the need for corneal transplantation;

The Company considers ICRS for *all* other clinical conditions, including vision correction due to myopia, **investigational** and **not** eligible for reimbursement.

Medical Policy

Documentation Requirements:

The Company reserves the right to request additional documentation as part of its coverage determination process. The Company may deny reimbursement when it has determined that the services performed were not medically necessary, investigational or experimental, not within the scope of benefits afforded to the member, and/or a pattern of billing or other practice has been found to be either inappropriate or excessive. Additional documentation supporting medical necessity for the services provided must be made available upon request to the Company. Documentation requested may include patient records, test results, and/or credentials of the provider ordering or performing a service. The Company also reserves the right to modify, revise, change, apply, and interpret this policy at its sole discretion, and the exercise of this discretion shall be final and binding.

Medical Policy

Sources of Information:

- American Academy of Ophthalmology (AAO). Preferred Practice Pattern. Corneal Ectasia PPP - 2018. Available at: <https://www.aao.org/preferred-practice-pattern/corneal-ectasia-ppp-2018>. Accessed June 11, 2025.
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- Bertino P, Magalhães RS, de Souza CJ Jr, Rocha G, Santhiago MR. Intrastromal corneal ring segments followed by PRK for postkeratoplasty high astigmatism: prospective study. *J Cataract Refract Surg.* 2022 Aug 1;48(8):912-923.
- Centers for Medicare & Medicaid Services (CMS). No national or local coverage determination found in the coverage database.
- Colin J, Malet FJ. Intacs for the correction of keratoconus: two-year follow-up. *J Cataract Refract Surg.* 2007;33(1):69-74.
- Ertan A, Kamburoğlu G, Bahadır M. Intacs insertion with the femtosecond laser for the management of keratoconus: one-year results. *J Cataract Refract Surg.* 2006;32(12):2039-2042.
- Kanellopoulos AJ, Pe LH, Perry HD, Donnenfeld ED. Modified intracorneal ring segment implantations (INTACS) for the management of moderate to advanced keratoconus: efficacy and complications. *Cornea.* 2006;25(1):29-33.
- Kymionis GD, Grentzelos MA, Diakonis VF, Pallikaris AI, Pallikaris IG. Nine-year follow-up of intacs implantation for keratoconus. *Open Ophthalmol J.* 2009;3:77-81.
- Kymionis GD, Siganos CS, Tsiklis NS, et al. Long-term follow-up of Intacs in keratoconus. *Am J Ophthalmol.* 2007;143(2):236-244.
- Poulsen DM, Kang JJ. Recent advances in the treatment of corneal ectasia with intrastromal corneal ring segments. *Curr Opin Ophthalmol.* 2015;26(4):273-277.

Applicable Code(s):	
CPT:	65785
HCPCS:	L8610
ICD10 Procedure Codes:	N/A

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