2017-2018 UPDATE ON CMS BLEPHAROPLASTY POLICY

The Centers for Medicare and Medicaid Services (CMS) has updated their reimbursement policy for performance of concurrent functional blepharoptosis repair with cosmetic blepharoplasty procedures.

The article published in the October 2016 issue of Ophthalmic ASC, a supplement of Ophthalmology Management, entitled "Medicare's New ASC Regulations for Ptosis and Blepharoplasty" has been posted with this update (see Articles/Oculoplastics) and includes critical information for those performing this surgery.

The CMS update states:

..."However, effective October 1, 2017, CMS is revising this policy to allow either cosmetic or medically necessary blepharoplasty to be performed in conjunction with a medically necessary upper eyelid blepharoptosis surgery. Specifically, physicians may receive payment for a medically necessary upper eyelid blepharoptosis from Medicare even when performed with (non-covered) cosmetic blepharoplasty on the same eye during the same visit. Since cosmetic procedures are not covered by Medicare, advance beneficiary notice of noncoverage (ABN) instructions would apply for cosmetic blepharoplasty. However, medically necessary blepharoplasty will continue to be bundled into the payment for blepharoptosis when performed with and as a part of a blepharoptosis surgery."

It is highly recommended that both articles be reviewed.