



# Member-friendly Clinical Criteria

Vision

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## Overview

The materials provided to you are guidelines used by the plan to authorize, modify or deny care for persons with similar illnesses or conditions. Specific care and treatment may vary depending on individual needs and the benefits covered under your contract.

Avēsis Clinical Criteria Guidelines and Practice Standards undergo regular revisions and an annual review by the Clinical and Quality Departments. Our Clinical Leadership develop clinical criteria, with input from a participating panel of internal and external general practitioners and specialists. Avēsis follows nationally recognized guidelines from healthcare experts to make sure you receive safe, high-quality care. These guidelines ensure consistent evaluation of the appropriate services that require review. **Where applicable, clinical criteria will follow State, Plan, and/or Program/Processing guidelines, which will take precedence over Avēsis national guidelines contained in this document.**

### Definitions:

- Clinical criteria are specific, evidence-based standards or guidelines used by dentists to determine the medical necessity of a treatment or procedure. They define why a treatment is appropriate and is clinical in nature. Clinical criteria generally do not vary by location or insurance plan.
- Processing guidelines are administrative or insurance-related requirements that must be met when submitting a procedure for reimbursement. They outline how and under what conditions a claim will be paid and may vary by insurance plan.

## Avēsis Clinical Criteria

Section	Nomenclature	Avēsis Clinical Criteria Protocols
<b>100 - Administrative</b>		
100.01	Routine, Medical and EM Coding	<p>This exam is for a new patient or an existing patient. The doctor will examine you for either:</p> <ol style="list-style-type: none"> <li>1. Routine Visits (Regular Checkups) This is like your yearly eye check. The doctor checks how well you can see, if you need glasses or contacts, and makes sure your eyes are healthy. Nothing is wrong, you are just making sure everything is okay.</li> <li>2. Medical Visits (When Something Is Wrong) This visit is for when your eyes hurt, are red, itchy, or you can't see well suddenly. The doctor looks for problems like infections or other eye issues and helps fix them.</li> <li>3. Evaluation &amp; Management (EM) Visits This is when the doctor spends extra time figuring out what's going on and deciding what to do next. They might ask more questions, do more tests, and make a plan to help your eyes get better or stay healthy.</li> </ol>
<b>200 - Materials &amp; Lenses</b>		
200.01	Vision Materials	These materials or treatments are only allowed when you are having issues with your vision. This is used to help you see better.
200.02	Medically Necessary Contact Lenses (MNCL) & Fitting	This exam and material is for people who need contact lenses for medical reasons, not just to see better. The eye doctor will check your eyes and measure them to make sure the contact lenses fit the right way. This helps keep your eyes healthy and makes sure you can see as clearly and comfortably as possible.

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<b>300 - Diagnostic Testing</b>		
300.01	Fundus Photography	This test can only be approved to record defects for some eye diseases that cause vision loss. This must help the doctor treat your eye disease or change your diagnosis.
300.02	SCODI	This test can only be approved if you have swelling in the back of your eye or if you are losing vision. Or if anyone in your family has the same issues.
300.03	VEP (Visual Evoked Potential) Testing	This test can only be approved once each year. This test can only be approved if you have, or the doctor thinks you may have, certain diseases of the back of the eye or body.
300.04	Visual Field Testing	This test can only be approved if the pressure in your eye is too high. If you have swelling in the back of your eye or if you are losing vision. Or if anyone in your family has the same issues.
300.05	Tear Osmolarity Testing	This test can be approved if you have dry eye disease.
300.06	ERG Testing	This test can only be approved if you have loss of vision in the back of your eye.
<b>400 - Standard Procedures</b>		
400.01	NLD Probing and Punctal Dilation	This procedure can only be approved if you have a lot of tearing. Or if you have a disease that causes a blockage in your eye ducts.
400.02	Punctal Occlusion by Plugs	This procedure can only be approved if you have dry eye problems. You have tried other treatments that have not helped.
400.03	Vision Therapy	This treatment can only be approved if your eyes do not work together when you look at things up close. You have blurry or double vision.
<b>500 - Surgical Procedures</b>		
500.01	Adult Strabismus Surgery	Surgery for adults can only be approved if you have double vision. Or if your outer vision is poor from crossed eyes.
500.02	Blepharoplasty and Ptosis Repair	This surgery can only be approved if you have problems with the lid of your eye that makes it hard to see. Or problems with the brow of your eye that makes it hard to see.
500.03	Cataract Extraction with IOL	Surgery can only be approved for these reasons. If your vision is poor far away or up close. If your vision makes your daily activities hard. If you have major loss of vision due to bright light. If you know the risks and benefits of surgery. You know the likely better vision will be greater than the risk.
500.04	Corneal Transplant	This surgery is where the doctor replaces the front part of your eye (called the cornea) with a healthy one from a donor. This is done when the cornea is damaged or cloudy and makes it hard to see. The new cornea helps light enter your eye the right way so you can see more clearly.
500.05	YAG (Yttrium-Aluminum Garnet) Laser Surgery	This laser surgery may be used when the thin layer behind your lens becomes cloudy and makes your vision blurry, or when pressure in your eye is too high because of the shape of your eye. It can also be used when medicine is not working well or when an eye disease continues even after other treatments.
<b>600 - Injections, Inserts &amp; Implants</b>		
600.01	BEOVU Intravitreal Injection	This medicine can only be approved to treat swelling in the back of your eye. Or a blocked vein in the back of your eye.
600.02	BOTOX Injection	Botox may be used if you have long-term eyelid twitching. Or if you have many movements of the mouth and face that you cannot control. This can also be used if you have terrible headaches.
600.03	DEXTENZA Ophthalmic Insert	This medicine can only be approved to help with swelling from surgery on your eye. Or to help with itchy eyes from a reaction.
600.04	DURYST Implant	This medicine can only be approved if you have high pressure in your eyes. You are not able to use eyedrops. You have a condition that makes it hard for you to put in eyedrops.

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600.05	EYLEA Intravitreal Injection	This medicine can only be approved to treat swelling in the back of your eye. Or a blocked vein in the back of your eye.
600.06	ILUVIEN Intravitreal Implant	This medicine can only be approved to treat swelling in the back of your eye.
600.07	LUCENTIS Intravitreal Injection	This medicine can only be approved to treat swelling in the back of your eye. Or a blocked vein in the back of your eye.
600.08	SUSVIMO Insert or Injection	This medicine can only be approved to treat swelling in the back of your eye. You have already tried other medicine that did not work.
600.09	YUTIQ Intravitreal Implant	This medicine can only be approved if you have swelling in the back of the eye. You already have tried other medicine that did not work.
600.10	VABYSMO Intravitreal Injection	This medicine can only be approved to treat swelling in the back of your eye. Or a blocked vein in the back of your eye.
600.11	SYFOVRE Intravitreal Injection	This medicine is used to treat damage to the back of the eye.
600.12	CIMERLI Intravitreal Injection	This medicine can only be approved to treat swelling in the back of your eye. Or a blocked vein in the back of your eye.
600.13	IZERVAY Injection	This medicine is used to treat damage to the back of the eye.

## Revisions

Date	Revisions
04/23/2026	Initial Version