

Corneal Relaxing Incisions (CRIs)

Also known as	<div><div>1. Limbal Relaxing Incisions (LRIs)</div><div>2. Peripheral Corneal Relaxing Incisions (PCRIs)</div></div>				
Description	<p>Corneal Relaxing Incisions are small incisions placed in the cornea to flatten out the cornea to eliminate or reduce the astigmatism. This procedure is often performed with or after cataract surgery, but can also be done outside of cataract surgery. It is performed to decrease or eliminate the individual’s need for eyeglasses or contact lenses. This is considered refractive eye surgery.</p>				
See also	<p>Similar, related, or easily confused documents.</p> <div><div>• Cataract Surgery - Surgery to remove the lens of the eye that has become cloudy, causing visual impairment and, in most cases, replaces it with an artificial lens.</div><div>• Corneal Transplant - A surgical procedure where a cornea from a health donor eye is transplanted to recipient once that person’s cornea has been partially or completely removed.</div><div>• Intraocular Lens (IOL) Implant - A standard intraocular (IOL) replaces the natural lens of the eye following cataract surgery or lens removal due to eye injury or disease. An accommodating IOL also corrects for presbyopia (far-sightedness that occurs with the aging process). Some models also correct for near and intermediate vision.</div><div>• Refractive Eye Surgery - surgery (often with a laser) on the eyes to correct a person’s refractive condition (near or farsightedness, myopia, hyperopia, astigmatism) to decrease or eliminate the need for glasses or contact lenses.</div></div>				
Table of Contents	<p>The following topics are included in this document:</p> <div><div>• Commercial</div><div>• Government Programs</div><div>• Individual and Family Business (IFB)</div></div>				
Document history	<p>The document history for the past 12 months is outlined below.</p> <table><tr><th>Date</th><th>Description</th></tr><tr><td>2.3.24</td><td>Refreshed due to age.</td></tr></table>	Date	Description	2.3.24	Refreshed due to age.
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Commercial

Introduction	<p>This section applies to all Commercial brands: Dean Health Plan (DHP), Mayo Medical Plan (MMP), Medica (including MHPS), and Prevea360.</p>						
Benefits (all except MMP)	<p>Refer to the table below.</p> <table><tr><th>Plan</th><th>Coverage</th></tr><tr><td>Fully Insured</td><td><ul style="list-style-type: none">• Not covered.• Listed as a contract exclusion.</td></tr><tr><td>Self-Insured</td><td><ul style="list-style-type: none">• Typically listed as a contract exclusion.• Check the Plan Document - groups may allow coverage.• If eligible, quote surgical benefits. Include physician, hospital, and anesthesia benefits.• Clinic POS: Also quote office visit benefits when done in the clinic.</td></tr></table>	Plan	Coverage	Fully Insured	<ul style="list-style-type: none">• Not covered.• Listed as a contract exclusion.	Self-Insured	<ul style="list-style-type: none">• Typically listed as a contract exclusion.• Check the Plan Document - groups may allow coverage.• If eligible, quote surgical benefits. Include physician, hospital, and anesthesia benefits.• Clinic POS: Also quote office visit benefits when done in the clinic.
Plan	Coverage						
Fully Insured	<ul style="list-style-type: none">• Not covered.• Listed as a contract exclusion.						
Self-Insured	<ul style="list-style-type: none">• Typically listed as a contract exclusion.• Check the Plan Document - groups may allow coverage.• If eligible, quote surgical benefits. Include physician, hospital, and anesthesia benefits.• Clinic POS: Also quote office visit benefits when done in the clinic.						
Mayo Medical Plan (MMP)	<p>This is a policy exclusion for all Mayo plans.</p> <ul style="list-style-type: none">• Look under non-covered services for Refractive eye surgery, including but not limited to LASIK surgery.						
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Government Programs

Introduction	This section applies to all Medicaid and Medicare products.				
AccessAbility (SNBC), Minnesota Senior Care Plus (MSC+)	<p>Medicaid only groups:</p> <ul style="list-style-type: none">See Medicaid below. <p>Medicare eligible groups:</p> <ul style="list-style-type: none">Not covered.Listed as a contract exclusion.Follows Medicare guidelines.Medicare is the primary payer.If no Medicare eligibility, Medicaid applies. See Medicaid below.				
AccessAbility Enhanced (I-SNBC), DUAL (MSHO)	<p>Not covered.</p> <ul style="list-style-type: none">Listed as a contract exclusion.Medica is the only payer.				
Cost (Prime)	<p>Not covered.</p> <ul style="list-style-type: none">Listed as a contract exclusion.Follows Medicare guidelines.Discount program: Members have access to QualSight, a managed laser vision correction program through a national network of accredited and experienced LASIK surgeons.<ul style="list-style-type: none">Included procedures: traditional, custom LASIK, PRK, and all laser bladeless technologies.Average of 40-50% off price of traditional LASIKPhone: 1-877-298-2010Website: https://www.qualsight.com/-medicaTip: This is a value add program, it is not a benefit through Medica.				
Med Advantage	<p>Not covered.</p> <ul style="list-style-type: none">Listed as a contract exclusion.Follows Medicare guidelines.Medica is the only payer.Discount program: Members have access to QualSight, a managed laser vision correction program through a national network of accredited and experienced LASIK surgeons.<ul style="list-style-type: none">Included procedures: traditional, custom LASIK, PRK, and all laser bladeless technologies.Average of 40-50% off price of traditional LASIKPhone: 1-877-298-2010Website: https://www.qualsight.com/-medicaTip: This is a value add program, it is not a benefit through Medica.				
Med Supp (Select, Signature)	<p>Not covered.</p> <ul style="list-style-type: none">Listed as a contract exclusion.Follows Medicare guidelines.Medicare supplement.Medicare is the primary payer.				
Medicaid	<p>Not covered.</p> <ul style="list-style-type: none">Listed as a contract exclusion.				
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Individual and Family Business (IFB)

Introduction This section applies to all Individual and Family Business (IFB) brands: Dean Health Plan (DHP), Medica, Medica (formerly WellFirst), and Prevea360.

Benefits Coverage depends on the state.

State	Coverage
All states (except Kansas)	<ul style="list-style-type: none">• Not covered.• Listed as a contract exclusion.
Kansas	<ul style="list-style-type: none">• Not covered except for medically necessary procedures associated with severe anisometropia.• If eligible, quote surgical benefits. Include physician, hospital, and anesthesia benefits.• Clinic POS: Also quote office visit benefits when done in the clinic.

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