blue of california

Medical Policy

Orthoptic Training	
Type: Medical Necessity and Investigational / Experimental	**Policy Specific Section:** Medicine
Original Policy Date: October 9, 1996	**Effective Date:** July 1, 2011

Definitions of Decision Determinations

Medically Necessary: A treatment, procedure or drug is medically necessary only when it has been established as safe and effective for the particular symptoms or diagnosis, is not investigational or experimental, is not being provided primarily for the convenience of the patient or the provider, and is provided at the most appropriate level to treat the condition.

Investigational/Experimental: A treatment, procedure or drug is investigational when it has not been recognized as safe and effective for use in treating the particular condition in accordance with generally accepted professional medical standards. This includes services where approval by the federal or state governmental is required prior to use, but has not yet been granted.

Split Evaluation: Blue Shield policy review can result in a Split Evaluation, where a treatment, procedure or drug will be considered to be investigational for certain indications or conditions, but will be deemed safe and effective for other indications or conditions, and therefore potentially medically necessary in those instances.

Description

Office-based orthoptic training, a technique of eye exercises, is a vision therapy modality intended to improve eye movements and/or visual tracking. In addition to its use in the treatment of convergence insufficiency, (a binocular vision disorder characterized by asthenopia, eye fatigue and discomfort), orthoptic training has been investigated for treatment of attention deficient disorders, dyslexia, dysphasia, and reading disorders.

This policy does not address standard vision therapy with lenses, prisms, filters or occlusion (i.e., for treatment of amblyopia or acquired esotropia prior to surgical intervention).

Policy

Office-based orthoptic training is considered **medically necessary** when **both** of the following criteria are met:

- Patient diagnosed with symptomatic convergence insufficiency (sensations of visual or ocular discomfort at near point combined with difficulty sustaining convergence)
- Symptoms have failed to improve following a minimum of 12-weeks of home-based therapy including, but not limited to:
    - Push-up exercises using an accommodative target
    - Push-up exercises with additional baseout prisms
    - Jump to near convergence exercises
    - Stereogram convergence exercises
    - Recession from a target; and maintaining convergence for 30 to 40 seconds

Office-based orthoptic training is considered **not medically necessary** for the treatment of learning disabilities.

Office-based orthoptic training is considered **investigational** for all other conditions, including but not limited to the following:

- Slow reading
- Visual disorders other than convergence insufficiency

Policy Guideline

Orthoptic eye exercises may be offered by orthoptists, optometrists, or ophthalmologists.

Up to 12 sessions of office-based orthoptic training (vergence/accommodative therapy), typically performed once per week, have been shown to improve symptomatic convergence insufficiency (CI) in children aged nine to 17 years. If patients remain symptomatic after 12 weeks of orthoptic training, alternative interventions should be considered.

A diagnosis of CI is based on asthenopic symptoms (i.e., sensations of visual or ocular discomfort or pain, headache, dimness of vision, dizziness, or nausea) at near point combined with difficulty sustaining convergence.

Convergence insufficiency and stereoacuity is typically documented by:

- Exodeviation at near at least four prism diopters greater than at far
- Insufficient positive fusional vergence (PFV) at near (PFV < 15 prism diopters blur or break) on PFV testing using a prism bar
- Near point of convergence (NPC) break of > 6 centimeters
- Appreciation by the patient of at least 500 seconds of arc on stereoacuity testing

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Internal Information

There is an MD Determination Form for this Medical Policy. It can be found on the following Web page:
http://myworkpath.com/healthcareservices/MedicalOperations/PSR_Determination_Pages.htm

Documentation Required for Clinical Review
• History and physical and/or consultation note including: prior treatment (type and duration) and response, baseline measurements, and recommended treatment plan Post Service • Office progress notes including: patient progress and compliance, quantifiable measurements / percentage of improvement, and treatment changes (if applicable)

The materials provided to you are guidelines used by this plan to authorize, modify, or deny care for persons with similar illness or conditions. Specific care and treatment may vary depending on individual need and the benefits covered under your contract. These Policies are subject to change as new information becomes available

Click here to view the appendix for this policy

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