



AMERICAN ACADEMY
OF OPHTHALMOLOGY



OUTPATIENT OPHTHALMIC
SURGERY SOCIETY
Belong Today, Shape Tomorrow®

February 9, 2023

Karen S. Lynch
President and Chief Executive Officer
CVS Health
151 Farmington Avenue
Hartford, CT 06156

Via electronic delivery

Re: Service codes update effective March 1, 2023

Dear Ms. Lynch,

On behalf of the American Academy of Ophthalmology (AAO), the American Society of Cataract and Refractive Surgery (ASCRS), and the Outpatient Ophthalmic Surgery Society (OOSS) representing over 20,000 ophthalmologists in the United States, we write today to express significant concerns about Aetna's plan to lower the grouper assignments for cataract surgery procedures, which creates yet another barrier to accessing vision-restoring care for Aetna beneficiaries. **We urge Aetna to reverse these reassignments and keep these procedures in their current groupers before the March 1, 2023 effective date.**

Our members have recently alerted us to a service codes update included in the [December 2022 Office Link Updates](#) newsletter, which reassigns CPT codes 66982, 66983, and 66984 to Aetna Enhanced Grouper: Category 5 (AEG5)/Coventry Enhanced Grouper: Category 5 and CPT codes 66987, 66988, 66989, and 66991 to Aetna Enhanced Grouper: Category 6 (AEG6)/Coventry Enhanced Grouper: Category 6. From our members, we understand these procedures are currently assigned to AEG8; thus, a change to AEG5 translates to an unsustainable 29% reduction to facility reimbursement.

The Academy, ASCRS, and OOSS strongly believe this drastic cut to reimbursement for cataract surgery will have extreme ramifications on the operations of ambulatory surgery centers where cataract surgeries are performed, particularly those serving rural and underserved communities.

Additionally, we are concerned by the lack of explanation for these changes. From the December 2022 newsletter it is unclear what is driving this decision and feel Aetna contracted providers and Aetna beneficiaries should not be left in the dark on these important decisions. If there are data showing the cost to the facility for providing these services is more reflective of the lower grouper, we would like the opportunity to review it with you and have a collaborative discussion.

The nation's ophthalmologists are committed to finding a solution that does not threaten our patients' access to vision-restoring surgery, and our organizations welcome the opportunity to work with Aetna to develop sensible policies. **To better understand the reasoning behind the grouper reassignments, we respectfully request a meeting with the appropriate team members at Aetna to discuss our concerns at your earliest convenience.** To set up a meeting or if you have any questions or concerns, please contact Brandy M. Keys, MPH, AAO Director of Health Policy at bkeys@aao.org or 202-737-6662 ext. 815, Nancey McCann, ASCRS Government Relations Consultant at nmccann@ascrs.org or 703-507-2221, or Michael Romansky, JD, OOSS Washington Counsel at mromansky@OOSS.org or 301-332-6474.

Sincerely,



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ASCRS Chair, Government Relations
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CC: Sree Chaguturu, MD, Executive Vice President and Chief Medical Officer, CVS Health; Jamie Sharp, MD, Vice President and Chief Medical Officer, Aetna Medicare