

COVERAGE CLASSIFICATIONS

To meet the diverse needs of our insureds, OMIC offers four coverage classifications:

Ophthalmology – No Surgery includes coverage only for non-surgical activities. Covered activities include the diagnosis and non-surgical treatment of diseases (other than screening for or treating retinopathy of prematurity), prescription of glasses or contacts, mechanical epilation, adult diagnostic canalicular probing or irrigation under topical anesthesia, punctal closure with plugs, and removal of superficial foreign bodies from the cornea and conjunctiva.

Ophthalmology – Surgery Class 1 includes coverage for non-surgical ophthalmology (other than screening for or treating retinopathy of prematurity) as defined above and the following surgical procedures: removal of sutures; fluorescein angiography; tear duct probing or irrigation done under local anesthetic; repair of minor lid lacerations limited to the skin and/or muscle; repair of minor conjunctival lacerations; biopsy of lid tumors; biopsy of the conjunctiva; removal of cysts and other suspected non-cancerous skin lesions and tumors; removal of corneal epithelium; implantation of eye jewelry; incision and drainage; canthotomy/cantholysis (without tarsal strip fixation or other suturing); punctal occlusion with cautery; laser punctal closure; hair removal using radio frequency/light energies, photoepilation, electrical epilation or laser; intramuscular injections; intravenous injections; subconjunctival injections; injection of botulinum toxin, hyaluronic acid, and other fillers; stromal puncture; micropigmentation; microdermabrasion; dermaplaning and superficial chemical peels limited to the epidermis; skin rejuvenation/tightening using non-invasive, non-ablative techniques; microneedling (with or without radio frequency or other energy); non-invasive cellulite reduction; noninvasive lipolysis; chemical lipolysis; blue light acne treatment (with or without use of photodynamic therapy); treatment of spider veins using IPL or lasers; removal of papillomas and chalazions; cryotherapy of the lid; thermal pulsation therapy for chronic cystic conditions of the eyelids; postoperative light adjustments for Light Adjustable Lens (LAL); suture tarsorrhaphy; marginal adhesion tarsorrhaphy without incision into the tarsus; non-incisional entropion or ectropion repair; and percutaneous skin scratch testing and sublingual immunotherapy (SLIT) for the treatment of ocular allergies.

Ophthalmology – Surgery Class 2 includes coverage for non-surgical ophthalmology (other than screening for or treating retinopathy of prematurity) and Surgery Class 1 procedures as defined above, assisting in surgery, and the following additional surgical procedures: laser capsulotomy, laser iridotomy, laser iridoctomy, laser iridoplasty, laser trabeculoplasty, wedge resection for suspected non-cancerous tumors, laser ablation of corneal vessels, cautery for conjunctivochalasis, temporal artery biopsy, depression of the posterior paracentesis site, use of self-retained amniotic membrane tissue for FDA-approved indications, periocular injections, periorbital injections, peribulbar injections, retrobulbar injections, and sub-Tenons injections. Note: Intracameral/intravitreal injections, skin resurfacing, and retina laser treatments require Surgery Class 3 coverage.

Ophthalmology – Surgery Class 3 includes coverage for non-surgical ophthalmology, assisting in surgery, and all surgical procedures considered ordinary and customary for the practice of ophthalmology, including screening for or treating retinopathy of prematurity.