1. **QUESTION:** What is PROKERA®?

**ANSWER:** According to the manufacturer, the PROKERA family of products are corneal-epithelial inserts consisting of an ophthalmic conformer that incorporates one or two layers of cryopreserved amniotic membrane: it is inserted between the eyeball and the eyelid and is self-retained on the eye. PROKERAs are Class II medical devices that serve as biologic corneal bandages. The CryoTek® processed tissue retains the key biologic components of the amniotic membrane that are anti-inflammatory, anti-scarring, anti-angiogenic, promote limbal stem-cell proliferation and wound healing. The FDA approval notes that it may remain in place up to 29 days. However, most uses of PROKERA will see natural dissolution of the membrane in about 3-7 days, at which point the conformer can be removed: it may be removed earlier if the patient’s condition improves.

The PROKERA family of products includes PROKERA, PROKERA Slim, PROKERA Plus, and PROKERA Clear.

2. **QUESTION:** What CPT code describes administration of PROKERA?

**ANSWER:** CPT code 65778 describes this procedure.

In 2014, CPT amended the code descriptor for 65778 from the original, which had existed since 2011. The descriptor currently reads, “Placement of amniotic membrane on the ocular surface; without sutures”.

3. **QUESTION:** Does Medicare cover placement of a PROKERA biologic corneal bandage?

**ANSWER:** Yes, when medically necessary.

4. **QUESTION:** What are the indications for PROKERA?

**ANSWER:** It is used to maintain space in the orbital cavity between the eyeball and the eyelid, and to prevent closure or adhesion. It is also used to facilitate healing in which the ocular surface cells have been damaged, or the underlying stroma is inflamed or scarred. Some conditions for which it may be used include:

- Chemical burns of the ocular surface
- Corneal epithelial defects, such as may be encountered clinically with:
  - Bullous or band keratopathy
  - Epithelial basement membrane dystrophy
  - Recurrent corneal erosions
  - Keratitis (exposure, neurotrophic, filamentary, bacterial or viral)
  - Post-op care after corneal procedures
  - Post-op care after pterygium surgery
- Corneal ulcer
- Partial limbal stem-cell deficiency
- Persistent epithelial defects (delayed healing)
- Stevens-Johnson Syndrome

5. **QUESTION:** What is the Medicare allowed amount for physicians performing 65778?

**ANSWER:** Payment rates vary by site of service. In 2020, the Medicare Physician Fee Schedule allowed amounts are:

- Physician (in-office) $1,436
- Physician (in-facility) $56

These amounts are adjusted in each locality by local indices. Other payers set their own fee schedules, which may differ considerably from Medicare rates.

January 11, 2020
The reimbursement information is provided by Corcoran Consulting Group based on publicly available information from CMS, the AMA, and other sources. The reader is strongly encouraged to review federal and state laws, regulations, code sets, and official instructions promulgated by Medicare and other payers. This document is not an official source nor is it a complete guide on reimbursement. Although we believe this information is accurate at the time of publication, the reader is reminded that this information, including references and hyperlinks, changes over time, and may be incorrect at any time following publication.

© 2020 Corcoran Consulting Group. All rights reserved. No part of this publication may be reproduced or distributed in any form or by any means, or stored in a retrieval system, without the written permission of the publisher. CPT is a registered trademark of the American Medical Association. Corcoran Consulting Group (800) 399-6565 www.corcoranccg.com


January 11, 2020

1 Not a complete list. For the FDA package inserts, link here.