

Policy for Photorefractive Surgery for the Correction of Refractive Error

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Purpose	This document is part of a suite of policies that the Integrated Care Board (ICB) uses to drive its commissioning of healthcare. Each policy in that suite is a separate public document in its own right but will be applied with reference to other policies in that suite.
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Document control:		
Date:	Version Number:	Section and Description of Change
October 2018	V1	Policy ratified by Healthier Lancashire and South Cumbria's Joint Committee of Clinical Commissioning Groups
August 2021	V1.1	Brought version control table to the front page. Changed word order of title. Content reviewed, no further amendments required.
July 2022	V1.2	Policy adopted by Lancashire and South Cumbria ICB – references to CCG replaced by ICB where relevant

1. Policy Criteria

- 1.1 The ICB considers that surgery for the correction of refractive error does not accord with the Principle of Appropriateness, therefore the ICB will not routinely commission this intervention.

2. Scope and definitions

- 2.1 This policy is based on the ICB's Statement of Principles for Commissioning of Healthcare (version in force on the date on which this policy is adopted).
- 2.2 Photorefractive surgery is a procedure to correct visual refractive error.
- 2.3 The scope of this policy includes but is not limited to requests for surgery to correct myopia, hyperopia, astigmatism and presbyopia including:
- Photorefractive keratectomy (PRK)
 - Laser in-situ keratomileusis (LASIK)
 - Laser assisted subepithelial keratomileusis (LASEK)
 - Laser assisted subepithelial keratomileusis with corneal collagen cross linking (LASEK-CXL)
 - Small incision lenticule extraction (SMILE)
- 2.4 The ICB recognises that a patient may have certain features, such as:
- having a refractive error due to myopia, hyperopia, astigmatism or presbyopia
 - wishing to have a service provided for their refractive error
 - being advised that they are clinically suitable photorefractive surgery and
 - be distressed by their refractive error and by the fact that that they may not meet the criteria specified in this commissioning policy.
- Such features place the patient within the group to whom this policy applies and do not make them exceptions to it.

3. Appropriate Healthcare

- 3.1 The purpose of photorefractive surgery is normally to correct a patient's refractive error, removing or reducing the requirement for glasses or contact lenses. However corrective surgery is considered a cosmetic treatment and compared to the use of spectacles or contact lenses, not an efficient use of NHS resources.
- 3.2 This policy relies on the criterion of appropriateness in that the ICB considers that other services competing for the same ICB resource more clearly have a purpose of preserving life or of preventing grave health consequences.

4. Effective Healthcare

- 4.1 The ICB does not call into question the effectiveness of photorefractive surgery and therefore this policy does not rely on the Principle of Effectiveness. Nevertheless, if a patient is considered exceptional in relation to the principles on which the policy does rely, the ICB may consider whether the purpose of the treatment is likely to be achieved in this patient without undue adverse effects before confirming a decision to provide funding.

5. Cost Effectiveness

- 5.1 The ICB does not call into question the cost-effectiveness of photorefractive surgery and therefore this policy does not rely on the Principle of Cost-Effectiveness. Nevertheless, if a patient is considered exceptional in relation to the principles on which the policy does rely, the ICB may consider whether the treatment is likely to be Cost Effective in this patient before confirming a decision to provide funding.

6. Ethics

- 6.1 The ICB does not call into question the ethics of photorefractive surgery and therefore this policy does not rely on the Principle of Ethics. Nevertheless, if a patient is considered exceptional in relation to the principles on which the policy does rely, the ICB may consider whether the treatment is likely to raise ethical concerns in this patient before confirming a decision to provide funding.

7. Affordability

- 7.1 The ICB does not call into question the affordability of photorefractive surgery and therefore this policy does not rely on the Principle of Affordability. Nevertheless, if a patient is considered exceptional in relation to the principles on which the policy does rely, the ICB may consider whether the treatment is likely to be affordable in this patient before confirming a decision to provide funding.

8. Exceptions

- 8.1 The ICB will consider exceptions to this policy in accordance with the Policy for Considering Applications for Exceptionality to Commissioning Policies.
- 8.2 In the event of inconsistency, this policy will take precedence over any non-mandatory NICE guidance in driving decisions of this ICB. A circumstance in which a patient satisfies NICE guidance but does not satisfy the criteria in this policy does not amount to exceptionality.

9. Force

- 9.1 This policy remains in force until it is superseded by a revised policy or by mandatory NICE guidance relating to this intervention, or to alternative treatments for the same condition.
- 9.2 In the event of NICE guidance referenced in this policy being superseded by new NICE guidance, then:
- If the new NICE guidance has mandatory status, then that NICE guidance will supersede this policy with effect from the date on which it becomes mandatory.
 - If the new NICE guidance does not have mandatory status, then the ICB will aspire to review and update this policy accordingly. However, until the ICB adopts a revised policy, this policy will remain in force and any references in it to NICE guidance will remain valid as far as the decisions of this ICB are concerned.

10. Associated OPCS/ICD codes

OPCS codes	ICD codes
C442, C444, C445	H442, H521, H522, H524