



Provider Checklist-Outpatient – Blepharoplasty

CPT Code: 15820, 15821, 15822, 15823

If requesting procedure for Blepharoplasty:

Describe the condition and related symptoms for the requested Blepharoplasty **INCLUDING** visual field defect w/in 30 degrees of fixation by perimetry **AND/OR** visual field improvement \geq 12 degrees **OR** 30% with lid taped

Informational Note:

Blepharoplasty is eyelid surgery performed for either reconstructive or cosmetic purposes. Reconstructive blepharoplasty corrects a visual impairment caused by drooping redundant skin or muscle laxity. In the absence of any documented functional limitations to the patient's vision, the procedure is considered cosmetic. Blepharoplasty is also considered cosmetic when performed to correct eyelid position in a patient with an ocular prosthesis. **Requests for cosmetic blepharoplasty require secondary medical review.**