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**CHAPTER 46: VISION (EYE-WEAR) SERVICES**

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**REVISION HISTORY LOG**

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Revised/ Issued Date	Section	Section Title	Number of Page (s)	Reason for Revision
05/12/14	46.5	Reimbursement	3	Revisions were made to pages 2 and 3 to update instructions for Medicaid crossovers.
05/12/14	Appendix E	Claims Filing	xx	The CMS-1500 claim form was revised. This section was replaced to include updated instructions and sample forms effective 4/30/14 for filing claims and adjusting/voiding claims.