
CHAPTER 46: VISION (EYE-WEAR) SERVICES

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OVERVIEW

Medicaid covered eye wear services are available to Medicaid eligible recipients who are under the age of 21. No eyewear services are available for recipients ages 21 and older unless the recipient receives both Medicare and Medicaid and in such cases, Medicare covers the required eyewear. In this instance, Medicaid may pick up a calculated portion of the payment as a Medicare cross-over claim.

Eye wear is limited to three pair per calendar year without review. Billing for the fourth and subsequent pairs must have documentation attached justifying the need for more than three pair of eye wear per year.

Providers may NOT require a payment/deposit for eyewear pending payment from Medicaid. Payment from the Louisiana Medicaid Program must be accepted as payment in full.

Eye wear may not be upgraded for cosmetic purposes, allowing the recipient to pay the remaining difference.

NOTE: Recipients are not allowed to pay any remaining difference for eyewear under any circumstance.