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**CHAPTER 46: VISION (EYEWEAR) SERVICES**

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**SECTION 46.6: RECORD KEEPING****PAGE(S) 1**

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### **RECORD KEEPING**

Providers are required to maintain records of all appointments and should reflect all procedures performed on those appointments. For services provided to beneficiaries under the Eyewear Program, records must be maintained for at least six years. Failure to produce these records on demand by the Medicaid program or its authorized designee will result in sanctions against the provider.

Records must include a detailed account of each beneficiary's visit indicating what services were provided. Also included in the beneficiary's record are copies of all claim forms submitted for prior authorization (PA) including any attachments, all PA letters, prescriptions, and any additional supporting documentation.

**NOTE:** A check-off list of codes and services billed is insufficient documentation.

The claim form or copies of the claim forms submitted for reimbursement are not considered sufficient to document the delivery of services. However, these items must be maintained in the beneficiary's record.

Providers should refer to Chapter 1 – General Information and Administration of the *Medicaid Services Manual* for additional information on record keeping.