RECIPIENT REQUIREMENTS

Medicaid covered eye wear services must be medically necessary and are available to eligible Medicaid recipients meeting the following criteria:

- Under the age of 21.
- Age 21 and older ONLY if the recipient receives both Medicare and Medicaid and Medicare covers the required eye wear. In this instance, Medicaid may pick up a calculated portion of the payment as a Medicare cross-over claim.

Eligibility Verification

It is the responsibility of the provider to verify recipient Medicaid eligibility. The recipient must be eligible for each date of service. All recipients enrolled in Louisiana's Medicaid Program are issued plastic identification cards. These permanent identification cards contain a card control number (CCN) which can be used by the provider to verify Medicaid eligibility.   The Department of Health and Hospitals (DHH) offers several options to assist providers with verification of current eligibility.

The following eligibility verification options are available:

- **Medicaid Eligibility Verification System (MEVS)**, an automated eligibility verification system using a swipe card device or PC software through vendors.
- **Recipient Eligibility Verification System (REVS),** an automated telephonic eligibility verification system.
- **e-MEVS**, a web application via the Louisiana Medicaid website (see Appendix D for website address).

These eligibility verification systems provide confirmation of the following:

- Recipient eligibility
- Third Party (Insurance) Resources
- Service limits and restrictions
- CommunityCARE
- Lock-In

Before accessing the REVS, MEVS, and e-MEVS eligibility verification systems, providers should be aware of the following:

- In order to verify recipient eligibility, inquiring providers will be required to supply two identifying pieces of information about the recipient when prompted.

- Specific dates of service must be requested. A date range in the date of service field on an inquiry transaction is not acceptable.