



Network Notification

Date: February 18, 2011

Number: MI-P-2011-06

To: Michigan Ophthalmologists

From: CareSource

Subject: Medicare Refraction/Eyeglasses Benefits

Below outlines the vision benefit for Special Needs Plan (SNP) members, also known as Medicare members.

Prior Authorization

Prior authorization is not required by CareSource unless it's provided by a non-participating provider.

What is Covered/What is Not Covered

- Routine exams (e.g., trouble with vision) are not a covered Medicare benefit
- Non-routine eye exams (to diagnose and treat diseases of the eye) are a covered Medicare benefit
- Glaucoma screenings are covered for Medicare beneficiaries who are at high risk of glaucoma, such as people with a family history of glaucoma, people with diabetes and African Americans who are age 50 and older

Frequency

- Glaucoma screenings - 1 exam annually
- Eyeglasses - \$50 limit total on eyewear annually (this includes 1 pair of glasses, 1 pair of lenses, 1 pair of frames)

Additional Information

- Members are allowed one pair of eyeglasses or contact lenses after each cataract surgery that includes insertion of an intraocular lens
- Members are allowed corrective lenses/frames (and replacements) after a cataract removal without a lens implant

The member's Medicaid Plan will be responsible for the out-of-pocket expenses.

Member Out of Pocket

- Non-routine exams - 20% co-insurance after \$162 deductible
- Glaucoma Screenings - \$0
- Glasses/lenses/frames - \$0
- Routine exams - Not a covered Medicare benefit

Covered Eye Exam Codes

- G0117-G0118
 - 92002-92004
 - 92012-92014
 - 92015
- } Only covered when the exam is non-routine as stated above
- } 92015 is not covered when billed with 92002-92004 and 92012-92014
- 92018-92019
 - 92020
 - 92065

Hardware and Fitting Codes

- 92070
- 92311-92313
- 92315-92326
- 92340-92342
- 92352-92358
- V2500-V2531
- V2020
- V2100-V2121
- V2200-V2221
- V2300-V2321
- V2410-V2430
- V2700
- V2710-V2755
- V2760-V2780
- V2782-V2784