

## O-211 Prior Approval

Prior to the provision of certain services, approval must be obtained from the Department. If charges are submitted for services that require prior approval and approval was not obtained, payment will not be made for services as billed. See Chapter 100 for a general discussion of prior approval provisions.

The Department will not give prior approval for an item or service if a less expensive item or service is considered appropriate to meet the patient's need or if the item is not considered medically necessary.

**Prior approval to provide services does not include any determination of the patient's eligibility. When prior approval is given, it is the provider's responsibility to verify the patient's eligibility on the date of service.**

The [Optometric Fee Schedule](#) documents procedure codes requiring prior approval. Although an item may not be listed as covered, a prior approval for an item that is “Not Elsewhere Classified” may be submitted for review.

If a participant becomes enrolled in an MCO or MCCN during a period of time for which a prior approval has been previously granted, the prior approval will no longer be applicable effective with the participant's managed care enrollment date. Prior approval requests for participants in an MCO or MCCN should be directed to the individual plan.

### O-211.1 Prior Approval Requests

*Revised Effective August 18, 2017*

Prior approval requests must contain enough information for Department staff to make a decision on medical necessity, appropriateness and anticipated patient benefits of the service.

**The single most common reason for a delay in processing of prior approval requests is lack of adequate information upon which to make an informed decision.**

The following services and materials may be provided only with prior approval of the Department:

- Additional eyeglasses within a two-year period for adults after eye surgery
- Contact lens/lenses and related service
- Custom-made artificial eye
- Low vision devices
- Polycarbonate eyeglass lenses for adults, age 21 and over (see Appendix O-2a for specific information)
- Eyeglasses fabricated by suppliers other than DOC
- Service/materials not otherwise identified on the schedule of procedures for optical services and supplies

## O-212 Limitations and Considerations on Specific Items

Revised Effective August 18, 2017

All eyeglasses and materials to repair eyeglasses must be ordered through the DOC laboratory.

Lenses available through the DOC laboratory are:

- Glass
- Plastic – no limits
- Polycarbonate
  - Polycarbonate lenses are available for all children through age 20, and adults with prior approval and a prescription of  $\pm 2.5$ .
  - Single vision, maximum is +8.50 and bifocal maximum is +8.0. Minus has no upper limit.
- Prisms

Materials not available through the DOC laboratory:

- Slab off lenses
- Miroflex frames
- Transition lenses

### O-212.1 Lenses

Eyeglasses are not a yearly benefit. Eyeglasses are to be replaced when medically necessary and when the minimum prescription change has been met. If an exam determines a participant's prescription has not changed and new eyeglasses are not required, it is not appropriate to order new glasses.

#### Single Vision Lenses

Lenses are covered only if the power is at least  $\pm 0.75$  diopters, in either the sphere **or** cylinder component.

A change of lenses is a covered service only when there is a change of at least  $\pm 0.75$  diopters, in either the sphere **or** cylinder component.

#### Bifocal Lenses

Bifocal lenses are covered only if the power of the bifocal addition is  $\pm 1.00$  diopter or more. A change in lenses is covered if the distance power meets the minimum change requirements ( $\pm 0.75$  diopters), or if the power of the bifocal addition is changed by at least  $\pm 0.50$  diopters.

**O-212.4 Low Vision Devices**

Low vision devices other than eyeglasses and prisms are covered only with prior approval. Requests for prior approval to dispense low vision corrective devices must include information explaining in detail the patient's need for the device. Additionally, the request is to include the cost of the device, the life expectancy of the device, and the manufacturer. Convenience and duplicate items will not be covered.

**O-212.5 Fabrication of Glasses by Supplier Other Than DOC**

Fabrication of glasses by a supplier other than the Department of Corrections is covered only with prior approval. Requests for prior approval must include sufficient detail on the type of lens or frame, to determine that DOC cannot manufacture them. The request must also include information explaining why a standard pair of glasses is not medically appropriate to meet the patient's need.

**O-212.6 Items Not Otherwise Identified**

Services or materials that are not identified on the Optometric or Practitioner Fee Schedules require prior approval. Information must be submitted describing in detail the material or service to be provided. A history of past treatment provided is required. Additionally, the request for approval must show why the material or service is better than any other commonly used to deal with similar diagnoses or conditions. All items or services requested must be medically necessary.

**O-212.7 Frequency of Services****O-212.7.1 Adult Services**

*Revised Effective August 18, 2017*

Eyeglasses for adults are covered if medically necessary. Adult participants who are 21 years of age and older are limited to one pair of eyeglasses in a two-year (730 day) period; however, the limitation does not apply to an individual who needs different eyeglasses following a surgical procedure such as cataract surgery. Providers must submit a prior approval request for an adult in these circumstances. Refer to Topic O-211 for information regarding prior approval and Topic O-212.1 for the minimum lens prescription changes required.

This policy for adults does not limit medically necessary eye examinations, or claims for repair/refitting of eyeglasses.

**O-212.7.2 Children's Services**

For children through age 20, eyeglasses are replaced as needed through the DOC laboratory, with no prior approval required. Documentation of new eyeglass orders must be maintained in the provider file. Refer to Topic O-205 - Record Requirements.