



## DIVISION OF MEDICAL SERVICES PROVIDER BULLETIN

Volume 29 Number 16

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October 3, 2006

### OPTICAL BULLETIN

#### CONTENTS

- **LENSES AND FRAMES CLARIFICATION**

#### LENSES AND FRAMES CLARIFICATION

Effective for dates of service on or after July 1, 2006, the 93rd General Assembly has approved appropriations for coverage of lenses and frames for adults who are eligible for Medicaid under one of the following categories of assistance: 01, 04, 05, 10, 11, 13, 14, 16, 19, 21, 24, 26, 83, and 84. Coverage is limited to one pair of eyeglasses, with a valid prescription, every two years beginning with dates of service on or after July 1, 2006.

Claims that have been denied due to this change will be reprocessed by the Division of Medical Services for dates of service on or after July 1, 2006.

**Provider Bulletins** are available on the DMS Web site at <http://dss.mo.gov/dms/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletins page.

**Missouri Medicaid News:** Providers and other interested parties are urged to go to the DMS Web site at <http://dss.missouri.gov/dms/global/pages/mednewssubscribe.htm> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official Missouri Medicaid communications via e-mail.

**MC+ Managed Care:** The information contained in this bulletin applies to coverage for:

- MC+ Fee-for-Service
- Medicaid Fee-for-Service
- Services not included in MC+ Managed Care

Questions regarding MC+ Managed Care benefits should be directed to the patient's MC+ Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the red MC+ card or by calling the Interactive Voice Response (IVR) System at 573-635-8908 and using Option One.

**Provider Communications Hotline**  
573-751-2896