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Federally Qualified
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Programs

New Medicaid State Purchase Eyeglass Contract Awarded

Classic Optical Laboratories, Inc., has been awarded the Medicaid State Purchase Eyeglass Contract (SPEC) beginning April 1, 2007. Classic Optical Laboratories has been contracted to provide most Medicaid-covered lenses, frames, and eyeglass component parts.

Classic Optical Laboratories, Inc., is the New Medicaid State Purchase Eyeglass Contract Provider

Classic Optical Laboratories, Inc., has been awarded the Medicaid State Purchase Eyeglass Contract (SPEC) beginning April 1, 2007. Under the SPEC, Medicaid vision providers are required to order most Medicaid-covered lenses, frames, and eyeglass component parts directly from the Medicaid SPEC provider. Refer to Attachment 1 of this *Wisconsin Medicaid and BadgerCare Update* for a list of frames available under the SPEC. Refer to Attachment 2 for a list of lenses available under the SPEC.

Note: The current SPEC provider, SKO Optical Manufacturing, Inc., d/b/a Shopko Optical Manufacturing, Inc., will continue to fill orders received prior to April 1, 2007.

As with previous contracts, Medicaid vision providers should purchase a sample kit of frames from the new contractor. Medicaid vision providers will not be reimbursed by

Wisconsin Medicaid for the sample kit. To obtain a sample kit, Medicaid vision providers may either call or write to Classic Optical Laboratories, Inc.

The new SPEC provider's address, telephone number, and fax number are as follows:

Classic Optical Laboratories, Inc.
3710 Belmont Avenue
PO Box 1341
Youngstown OH 44501
Telephone: (888) 522-2020
Fax: (888) 522-2022

New SPEC Provider Web Site

Through the Classic Optical Laboratories, Inc., Web site at www.classicoptical.com, Medicaid providers can place and track online orders for Medicaid-covered lenses, frames, and eyeglass component parts. To access these online options, providers are required to have a username and password that can be requested in one of two ways:

- Complete and submit a request form online. To access the request form online, click the "new user? click for login" link in the Login box.
- Call Classic Optical Laboratories, Inc., at (888) 522-2020 during regular business hours (8 a.m. - 5 p.m. EST, Monday through Friday).

Procedure Code and Modifier Changes

Effective for dates of service on and after April 1, 2007, when requesting prior authorization (PA) for transition lenses, providers are required to indicate Healthcare Common Procedure Coding System (HCPCS) procedure code V2744 (Tint, photochromatic, per lens). Providers are no longer required to indicate modifiers U1 and U2 when requesting PA for transition lenses.

Two HCPCS procedure codes have been added to the list of covered lenses: V2220 (Bifocal add over 3.25d) and V2320 (Trifocal add over 3.25d). Refer to Attachment 2 for a complete list of lenses available under the new Wisconsin Medicaid SPEC.

Information Regarding Medicaid HMOs

This *Update* contains Medicaid fee-for-service policy and applies to providers of services to recipients on fee-for-service Medicaid only. For Medicaid HMO or managed care policy, contact the appropriate managed care organization. Wisconsin Medicaid HMOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.

The *Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at dhfs.wisconsin.gov/medicaid/.

PHC 1250

ATTACHMENT 1

Frames Available Under the Wisconsin Medicaid State Purchase Eyeglass Contract

The following tables list the types of frames Medicaid vision providers may order from the Wisconsin Medicaid State Purchase Eyeglass Contract provider beginning on April 1, 2007.

Women's Frames
Bella Flex 1 (CSC)
Boulevard 4153 (Hart)*
Boulevard 4154 (Hart)*
Echo (Eye Q)
Exclusive 134 (COI)
First Lady 101 (CSC)
Fregossi 318 (COI)
Jackie (Eye Q)
Libby (Eye Q)
Mainstreet 220 (Hart)
Suburban 12 (Ben Glo)
SW 414 (Eye Q)

Men's Frames
Boulevard 1003 (Hart)
Exclusive 135 (COI)
Gus (Eye Q)
Hunter (Limited Editions)
Legend (Eye Q)
Mainstreet 106 (Hart)
Moscow (Zimco)*
Panda 8 (CSC)
SW 212 (Eye Q)

Girls' Frames
Bella Flex 2 (CSC)
Dazzle (Modern)*
Exclusive 90 (COI)
Laurel (Eye Q)
Panda 2 (CSC)
Suburban 18 (COI)
SW 319 (Eye Q)

Boys' Frames
Baby (Hart)
Boulevard 4099 (Hart)
Dynamite (Modern)*
Panda 9 (CSC)
Panda 12 (CSC)
SW 201 (Eye Q)
SW 311 (Eye Q)
York (Eye Q)

Infants' Frames
Pony (Eye Q)

Occupational Frames
SP 83 (Titmus)

Half-Eye Frames
Phoenix (Eye Q)

* Indicates new frame.

ATTACHMENT 2

Lenses Available Under the Wisconsin Medicaid State Purchase Eyeglass Contract

The following tables list the types of lenses Medicaid vision providers may order from the Wisconsin Medicaid State Purchase Eyeglass Contract (SPEC) provider beginning on April 1, 2007. Medicaid vision providers should refer to the current Healthcare Common Procedure Coding System code book for any necessary procedure codes.

Single Vision Lenses
Sphere, single vision; plano to plus or minus 4.00, per lens
Sphere, single vision; plus or minus 4.12 to plus or minus 7.00d, per lens
Sphere, single vision; plus or minus 7.12 to plus or minus 20.00d, per lens
Spherocylinder, single vision, plano to plus or minus 4.00d sphere; 0.12 to 2.00d cylinder, per lens
Spherocylinder, single vision, plano to plus or minus 4.00d sphere; 2.12 to 4.00d cylinder, per lens
Spherocylinder, single vision, plano to plus or minus 4.00d sphere; 4.25 to 6.00d cylinder, per lens
Spherocylinder, single vision, plano to plus or minus 4.00d sphere; over 6.00d cylinder, per lens
Spherocylinder, single vision, plus or minus 4.25d to plus or minus 7.00d sphere; 0.12 to 2.00d cylinder, per lens
Spherocylinder, single vision, plus or minus 4.25d to plus or minus 7.00d sphere; 2.12 to 4.00d cylinder, per lens
Spherocylinder, single vision, plus or minus 4.25d to plus or minus 7.00d sphere; 4.25 to 6.00d cylinder, per lens
Spherocylinder, single vision, plus or minus 4.25d to plus or minus 7.00d sphere; over 6.00d cylinder, per lens
Spherocylinder, single vision, plus or minus 7.25 to plus or minus 12.00d sphere; 0.25 to 2.25d cylinder, per lens
Spherocylinder, single vision, plus or minus 7.25 to plus or minus 12.00d sphere; 2.25d to 4.00d cylinder, per lens
Spherocylinder, single vision, plus or minus 7.25 to plus or minus 12.00d sphere; 4.25 to 6.00d cylinder, per lens
Spherocylinder, single vision, sphere over plus or minus 12.00d, per lens
Lenticular (myodisc), per lens, single vision
Lenticular lens, per lens, single

Multifocal Lenses
Sphere, bifocal, plano to plus or minus 4.00d, per lens
Sphere, bifocal, plus or minus 4.12 to plus or minus 7.00d, per lens
Sphere, bifocal, plus or minus 7.12 to plus or minus 20.00d, per lens
Spherocylinder, bifocal, plano to plus or minus 4.00d sphere; 0.12 to 2.00d cylinder, per lens
Spherocylinder, bifocal, plano to plus or minus 4.00d sphere; 2.12 to 4.00d cylinder, per lens
Spherocylinder, bifocal, plano to plus or minus 4.00d sphere; 4.25 to 6.00d cylinder, per lens
Spherocylinder, bifocal, plano to plus or minus 4.00d sphere; over 6.00d cylinder, per lens
Spherocylinder, bifocal, plus or minus 4.25 to plus or minus 7.00d sphere; 0.12 to 2.00d cylinder, per lens
Spherocylinder, bifocal, plus or minus 4.25 to plus or minus 7.00d sphere; 2.12 to 4.00d cylinder, per lens
Spherocylinder, bifocal, plus or minus 4.25 to plus or minus 7.00d sphere; 4.25 to 6.00d cylinder, per lens
Spherocylinder, bifocal, plus or minus 4.25 to plus or minus 7.00d sphere; over 6.00d cylinder, per lens
Spherocylinder, bifocal, plus or minus 7.25 to plus or minus 12.00d sphere; 0.25 to 2.25d cylinder, per lens

Spherocylinder, bifocal, plus or minus 7.25 to plus or minus 12.00d sphere; 2.25 to 4.00d cylinder, per lens
Spherocylinder, bifocal, plus or minus 7.25 to plus or minus 12.00d sphere; 4.25 to 6.00d cylinder, per lens
Spherocylinder, bifocal, sphere over plus or minus 12.00d, per lens
Lenticular (myodisc), per lens, bifocal
Bifocal seg width over 28mm
Bifocal add over 3.25d
Lenticular lens, per lens, bifocal
Sphere, trifocal, plano to plus or minus 4.00d, per lens
Sphere, trifocal, plus or minus 4.12 to plus or minus 7.00d per lens
Sphere, trifocal, plus or minus 7.12 to plus or minus 20.00, per lens
Spherocylinder, trifocal, plano to plus or minus 4.00d sphere; 0.12 to 2.00d cylinder, per lens
Spherocylinder, trifocal, plano to plus or minus 4.00d sphere; 2.25 to 4.00d cylinder, per lens
Spherocylinder, trifocal, plano to plus or minus 4.00d sphere; 4.25 to 6.00 cylinder, per lens
Spherocylinder, trifocal, plano to plus or minus 4.00d sphere, over 6.00d cylinder, per lens
Spherocylinder, trifocal, plus or minus 4.25 to plus or minus 7.00d sphere; 0.12 to 2.00d cylinder, per lens
Spherocylinder, trifocal, plus or minus 4.25 to plus or minus 7.00d sphere; 2.12 to 4.00d cylinder, per lens
Spherocylinder, trifocal, plus or minus 4.25 to plus or minus 7.00d sphere; 4.25 to 6.00d cylinder, per lens
Spherocylinder, trifocal, plus or minus 4.25 to plus or minus 7.00d sphere; over 6.00d cylinder, per lens
Spherocylinder, trifocal, plus or minus 7.25 to plus or minus 12.00d sphere; 0.25 to 2.25d cylinder, per lens
Spherocylinder, trifocal, plus or minus 7.25 to plus or minus 12.00d sphere; 2.25 to 4.00d cylinder, per lens
Spherocylinder, trifocal, plus or minus 7.25 to plus or minus 12.00d sphere; 4.25 to 6.00d cylinder, per lens
Spherocylinder, trifocal, sphere over plus or minus 12.00d, per lens
Lenticular (myodisc), per lens, trifocal
Trifocal seg width over 28mm
Trifocal add over 3.25

Miscellaneous Lenses
Variable asphericity lens; single vision, full field, glass or plastic, per lens
Variable asphericity lens; bifocal, full field, glass or plastic, per lens
Balance lens, per lens
Slab off prism, glass or plastic, per lens
Prism, per lens
Special base curve, glass or plastic, per lens

Medicaid vision providers are required to obtain prior authorization (PA) from Wisconsin Medicaid before placing an order with the SPEC for any of the lenses in the following table.

Lenses and Services Available Only with PA from Wisconsin Medicaid		
Procedure Code	Modifier	Description
V2744	SC ¹	Tint, photochromatic, per lens (Note: Also use this code for PA requests for transition lenses)
V2745	SC	Addition to lens; tint, any color, solid, gradient or equal, excludes photochromatic, any lens material, per lens
V2755	SC	U-V lens, per lens
V2780	SC	Oversize lens, per lens
V2782	SC	Lens, index 1.54 to 1.65 plastic or 1.60 to 1.79 glass, excludes polycarbonate, per lens
V2783	SC	Lens, index greater than or equal to 1.66 plastic or greater than or equal to 1.80 glass, excluding polycarbonate, per lens
V2784 ²	SC	Lens, polycarbonate or equal, any index, per lens

¹ SC = Medically necessary service or supply.

² Requires PA for recipients ages 21 and over.