

STATE OF IDAHO MEDICAID

PROVIDER PROCESS FOR CUSTOM MADE CONTACT LENSES, KERATOCONUS DIAGNOSIS

1. Contact lenses for keraoconus sometimes require special handling. If gas permeable V2510 or V2511 lenses will meet the participant's needs, fax the Contact Lens Prior Authorization Request Form to the Medical Care Unit, and these will be processed as per routine . If the lenses need to be custom made, please submit code V2599 (which is miscellaneous code), qty. 2, noting "custom made contacts for keratoconus, diagnosis code 371. 6." Fax physician notes supporting the diagnosis of keratoconus. Custom made lenses need special handling as explained below.
2. If you need a Fitting Kit, contact Classic Optical to discuss the type of Fitting Kit and/or specifications needed for special fit custom made contacts. The phone number for Classic Optical is 800-522-2020 and a Customer Service representative will assist you.
3. A Rose K gas permeable, McGuire gas permeable, or Dyna Intra Limbal (menicon material) Fitting Kit will be loaned to you, free of charge, to fit your patient. Classic will ship the Fitting Kit to the provider, and include a pre-printed, pre-paid label for the Fitting Kit to be returned to Classic Optical.
4. After the trial fit, please clean and disinfect the lenses. Using the pre-printed label, ship it back to Classic Optical at 3710 Belmont Ave., Youngstown, OH., 44505.
5. Place order for contacts through Classic Optical. The web address is: www.classicoptical.com. Order information needed is contact design, material, color, power base curve and diameter. Submit eyeglass prescription, also.
6. Classic will proceed with ordering the contacts and will send the custom made contact lenses to the provider.
7. There is a warranty period on these Lenses, during which time you may exchange the contacts. A new authorization is not needed if the contacts are under warranty. This is a no charge "exchange in place" situation. The original unusable contact must be returned to Classic.
8. Utilize the PA number approved by the Medical Care Unit when submitting the claim.