

<b>Division of Medicaid</b>	<b>New:</b>	<b>Date:</b>
<b>State of Mississippi</b>	<b>Revised: X</b>	<b>Date: 11/01/05</b>
<b>Provider Policy Manual</b>	<b>Current:</b>	<b>05/01/08</b>
<b>Section: <u>Vision Services</u></b>	<b>Section: 29.03</b>	
<b>Subject: <u>Beneficiary Cost Sharing</u></b>	<b>Pages: 1</b>	
	<b>Cross Reference: <u>Beneficiary Cost Sharing 3.08</u></b>	

Section 1902(a) (14) of the Social Security Act permits states to require certain beneficiaries to share some of the costs of receiving Medicaid services:

**Co-Payment Amounts for Vision Services**

Physician (any setting) — \$3.00 per visit  
 Eyeglasses ————— \$3.00 per pair

**Vision Services Co-Payment Exceptions**

Co-payment, by federal law, cannot be collected in certain instances. The following groups of beneficiaries are excluded from co-payment for vision services:

- C — Children —————
- N — Nursing facility residents —————
- P — Pregnant Women (**Reminder: The pregnancy-only eligibility category, COE 88, is excluded from vision service coverage**)

When the beneficiary is co-pay exempt, one of the exception codes **must** be indicated on the claim in the Medicaid ID number field as a suffix to the Medicaid number. Otherwise, co-payment will be deducted from the claim payment amount.

**Collection of Co-Payment**

In the absence of knowledge or indication to the contrary, the provider may accept the beneficiary's assertion that he/she cannot afford to pay the cost sharing co-payment amount. The provider may not deny services to any eligible Medicaid individual due to the individual's inability to pay the cost of the co-payment. However, the individual's inability to pay the co-payment does not alter the Medicaid reimbursement amount for the claim, unless the beneficiary or service is excluded from the co-payment policy as listed.

Collecting the co-payment amount from the beneficiary is the responsibility of the provider. In cases of claim adjustments, the responsibility of refunding or collecting the additional cost sharing co-payments from the beneficiary remains the responsibility of the provider.

Refer to Provider Policy Manual Section 3.08 for Beneficiary Cost Sharing policy.