

Vermont Medicaid Eyeglass Program Frequently Asked Questions

Q: Who is eligible for eyeglasses under the Vermont Medicaid Eyeglass Program?

A: The Vermont Medicaid Eyeglass Program covers children under the age of 21.

Q: Are there minimum Rx requirements for an eligible Vermont Medicaid member to receive eyeglasses?

A: No. There is no minimum RX requirement for an eligible member to receive glasses.

Q: Can an eligible member use a non-contract frame?

A: Medical necessity for special frames or lenses outside of Vermont Medicaid's sole source contract requires that the prescribing optometrist or ophthalmologist seek prior authorization from DVHA. This applies for new lenses when Classic Optical determines that the member's current lenses cannot be incorporated safely and reasonably into the special frames.

Q: How often can an eligible member get a new pair of eyeglasses?

A: An eligible member can receive a new pair of eyeglasses once every 24 months from the initial date of service. Eligible members under age six (6) are allowed one pair of glasses every year, when medically necessary.

Q: When can an eligible member get a replacement pair of eyeglasses?

A: **Broken Frame or Lenses** - Eyeglasses (frame and/or lenses) may be replaced sooner than the 24-month benefit period if the frame or lenses are broken and vision acuity is compromised, as determined by the provider. Only the broken component(s) will be replaced. Frames sent to Classic Optical for replacement lenses must be sent by traceable means, at the provider's expense. Classic Optical is not responsible for frames that do not arrive, damage done in transit, frame breakage during processing, or warranties on non-contract frames. Classic Optical reserves the right to return frames it determines are not useable for new lenses.

Lost Eyeglasses - Replacement of lost eyeglasses are limited to the same frame and Rx as the lost pair.

Note: The benefit period restarts whenever a replacement pair of eyeglasses is issued.

Q: What lenses are covered under the Vermont Medicaid Eyeglass Program?

A: All lenses will be polycarbonate, unless medical necessity requires a different material.

Q: Can an eligible member upgrade his/her contract frame and pay the difference for the upgrade?

A: No. The Vermont Medicaid Eyeglass Program will not cover the cost of the frame if it is not a contract frame.

Q: Can an eligible member upgrade his/her covered lenses and pay the difference for the upgrade?

A: Vermont Medicaid members may purchase non-covered services at their own expense. Classic Optical will bill the provider directly for the non-covered services.

Q: How long does it take for a Medicaid order to be completed?

A: All properly submitted and completed orders will be shipped within six (6) business days. The first of the six (6) business days shall be the workday immediately following receipt of the properly submitted order.

Q: What is the product warranty?

A: All frames and lenses are fully guaranteed against manufacturer defects for 90 days from the date of service. Frames and/or lenses determined to be damaged by the patient are not covered under this warranty. Where frames and lenses are defective, the provider shall return the products to the lab within seven (7) business days of the original delivery date. Such circumstances include, but are not limited to:

- Lenses that are broken, scratched, or chipped at time of receipt by the provider.
- Lenses that deviate from the Vermont Medicaid vision care provider's prescription beyond the deviation standards allowed by the ANSI Z80 Committee on Ophthalmic Standards.

This warranty is voided if the lenses that have been processed, edged, or tinted after delivery unless the provider can clearly demonstrate that the unprocessed lenses were defective.

Q: Is a copy of the original order required when returning a defective product?

A: Yes. If the frame and/or lens is defective, a copy of the original order or original invoice must be included for verification of the warranty period.

Q: When is prior authorization required?

A: Providers should always consult the fee schedule to determine current code information, <https://vtmedicaid.com/#/feeSchedule>.

Q: Where can a provider obtain a prior authorization form?

A: Prior Authorization Request Forms are available for download from the Classic Optical website, <https://www.classicoptical.com/>, by phone 888.522.2020, or on the Vermont Medicaid Eyeglass Program website, or the DVHA website, <https://dvha.vermont.gov/forms-manuals/forms/clinical-prior-authorization-forms>.

Q: Where can a provider get help with prior authorization issues?

A: Providers should contact the Gainwell Technologies Helpdesk at 800.925.1706.

Q: Does Classic Optical verify a member's eligibility before processing an order?

A: Eligibility verification is the responsibility of the provider before an order is sent to Classic Optical. Providers may check eligibility through a web services account at <https://vtmedicaid.com/#/home> or call the automated Voice Response System (VRS) at 800.925.1706.

Q: How can a provider order eyeglasses from Classic Optical?

A: Orders are accepted online, by fax, and by mail. The best way to place an order is through the secure Vermont Medicaid Eyeglass Program-specific website at <https://www.classicoptical.com/>. Online orders reach Classic Optical faster and are therefore processed faster than orders submitted via fax or through the mail. Call Classic Optical Customer Service at 888.522.2020 or submit a request online to obtain a username and password.

Q: Where can a provider get a paper order form?

A: Providers can download a [blank order form](#) from the Classic Optical website after logging on to the Vermont Medicaid Eyeglass Program website. Providers may also call Classic Optical Customer Service at 888.522.2020 to request a blank order form and they will fax or email the form to you. Business Hours: 8:00 am-8:00 pm EST, Monday through Friday.

Q: Is it true that Classic Optical's online order forms are SMART to ensure speedy order processing?

A: Yes. The online order form has been developed to prevent submission of incorrect ophthalmic combinations and incomplete orders. The online order form is limited to items available under the Vermont Medicaid Eyeglass Program.

The online order process will not allow orders requiring prior authorization to be submitted through the portal. These orders must be faxed to Classic Optical. Orders requiring special handling, such as provider error remake orders are also not permitted to be ordered online.

Q: Can a provider submit an order over the phone?

A: No.

Q: Can a provider view a member's previous Rx?

A: Yes. Providers can view a member's previous Rx that was processed by Classic Optical. On the "Vision Services Profile" screen, click an exam date to view the specific previous Rx. To access the Vision services Profile, choose the "Place Medicaid Order" option, enter the recipient ID and click search. If Classic Optical has processed orders for this member a list of orders displays by date of service. Clicking on the exam date displays the order form.

Q: How can a provider check the status of an order placed with Classic Optical?

A: Providers can visit the "Track Orders" screen (listed under Doctors Links) on Classic's Vermont Medicaid Eyeglass Program website to confirm an order was received and to track its status. Providers can also call Classic Optical Customer Service at 888.522.2020.

Q: What are the Customer Service hours of operation?

A: Classic Optical's Customer Service representatives are ready to take your call between the hours of 8:00 AM to 8:00 PM EST, Monday through Friday.