

Southwest Oregon IPA, Inc. (SWOIPA) administers physical and behavioral health benefits for Advanced Health members.

Due to recent changes to routine vision coverage, SWOIPA would like to take the opportunity to provide clarification regarding the in-network vision benefits.

Effective immediately, SWOIPA has revised its coverage for vision claims in accordance with OAR 410-140-0140¹ to include routine vision exams for adults¹¹ once every 24 months:

- (4) Coverage for eligible adults (age 21 and older):
 - (a) One complete examination and determination of refractive state is limited to once every 24 months for non-pregnant people;
 - (b) One complete examination and determination of refractive state is limited to once every 24 months for pregnant people and during the protected post-partum 12-month period (OAR 410-200-0135).
 - (c) Diagnostic evaluations and medical examinations are not limited if documentation in the physician's or optometrist's clinical record justifies the medical need for diagnosis;
 - (d) Ophthalmological intermediate and comprehensive exam services are not limited for allowable medical diagnosis;
 - (e) Vision therapy is not covered; and
 - (f) Visual services for the purpose of prescribing glasses or contact lenses and fitting fees are as follows:
 - (A) When determined necessary during a limited complete examination and determination of refractive state for pregnant people and during the protected post-partum 12-month period (OAR 410-200-0135).
 - (B) Non-pregnant adults are not covered, except when the client:
 - (i) Has a medical diagnosis of aphakia, pseudophakia, congenital aphakia, keratoconus; or
 - (ii) Lacks the natural lenses of the eye due to surgical removal (e.g., cataract extraction) or congenital absence; or
 - (iii) Has had a keratoplasty surgical procedure (e.g., corneal transplant) with limitations described in OAR 410-140-0160 (Contact Lens Services and Supplies).

Routine vision exams are defined as CPT codes 92002-92014 that are paired with primary diagnosis code Z01.00 as stated by OHA's clarification of vision coverage given in the OHA 8/11/2023 issue of Provider Matters:::

Clarification of coverage for vision exams and corrective lenses

The OHP Plus (BMM, BMH, BMD) and CWM Plus (CWX) benefit packages cover routine eye exams (CPT codes 92002-92014, with primary diagnosis Z01.00) for any eye condition as follows:

- Once every 24 months for adults aged 21 or older with the OHP Plus (BMM, BMH, and BMD) benefit package.
- When clinically appropriate for OHP Plus members under age 21 and CWM plus (CWX) members.

Corrective lenses are only covered if the member is under age 21, pregnant, or has a condition related to aphakia or keratoconus:

- Keratoconus, unspecified
- Keratoconus, stable condition
- Keratoconus, acute hydrops
- Aphakia
- Congenital aphakia (congenital absence of lens)
- Absence of eye lens(es), such as following cataract extraction

Any vision exam claims for adult members that do not fit within these parameters will be evaluated as possible diagnostic evaluations and medical examinations. The extent of these assessments will not be restricted when the medical records substantiate the necessity for a diagnosis. It's important to note that claims for diagnostic evaluations and medical examinations must still include the medical provider who referred the member for vision services to prevent claim denials.

Please let the Claims Department know if you have any additional questions or concerns regarding these changes. The Claims Department can be reached at 541-269-0567.

Thank you Jacki Bohannon Claims Manager

Applicable Advanced Health coverage types:

- 1. CCOA Medical, Mental Health, Dental, Non-Emergent Medical Transportation (NEMT).
- 2. CCOB Medical, Mental Health, NEMT

ⁱ OAR 410-140-0140: https://secure.sos.state.or.us/oard/viewSingleRule.action?ruleVrsnRsn=293750

ii Applies to members with CCOA and CCOB benefit plans.

iii OHA 8/11/2023 issue of Provider Matters: https://content.govdelivery.com/accounts/ORDHS/bulletins/369acda