

## Eye Prosthetics

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**Also known as** 1. Artificial Eye

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**Description** An artificial eye. It does not restore vision.

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**See also** Similar, related, or easily confused documents.

- [Keratoprosthesis for Corneal Opacity](#) – A keratoprosthesis (KPro), or artificial cornea, is a device intended to restore vision to patients with severe corneal disease where corneal transplantation has repeatedly failed or is not an option.

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**Commercial** Covered under *Prosthetic* benefits.

**Note:** There are no in-network (INN) providers, so the member can see any prosthetic eye provider to receive INN benefits. Prior authorization (PA) is not needed.

- There is a temporary CPE to pay claims at the INN benefit level.
  - Refer to [Temporary CPE Grid \(Open & Closed Issues\)](#) for the verbiage.
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## Eye Prosthetics, Continued

### Government Programs

Refer to the table below.

Plan	Coverage
AccessAbility (SNBC), Minnesota Senior Care Plus (MSC+)	<p><a href="#">Medicaid only groups</a>:</p> <ul style="list-style-type: none"><li>• Refer to <a href="#">Medicaid</a> below.</li></ul> <p><a href="#">Medicare eligible groups</a>:</p> <ul style="list-style-type: none"><li>• Covered under DME benefits.</li><li>• <b>Note:</b> There are no in-network (INN) providers, so the member can see any prosthetic eye provider to receive INN benefits. Prior authorization (PA) is not needed.</li><li>• Medicare is the primary payer.</li><li>• Follows Medicare guidelines.</li><li>• If no Medicare eligibility, Medicaid applies. Refer to <a href="#">Medicaid</a> below.</li></ul>
AccessAbility Enhanced (SNBC SNP), DUAL (MSHO)	<ul style="list-style-type: none"><li>• Covered under DME benefits.</li><li>• <b>Note:</b> There are no in-network (INN) providers, so the member can see any prosthetic eye provider to receive INN benefits. Prior authorization (PA) is not needed.</li><li>• Medica is the only payer.</li></ul>
Advantage	<ul style="list-style-type: none"><li>• Covered under DME benefits.</li><li>• <b>Note:</b> There are no in-network (INN) providers, so the member can see any prosthetic eye provider to receive INN benefits. Prior authorization (PA) is not needed.</li><li>• Follows Medicare guidelines.</li><li>• Provider must bill per <a href="#">Medicare Product Grid</a>.</li><li>• Medica is the only payer.</li></ul>

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## Eye Prosthetics, Continued

### Government Programs, continued

Plan	Coverage
Advantage PartnerCare (I-SNP)	<ul style="list-style-type: none"> <li>• Covered under DME benefits.</li> <li>• <b>Note:</b> There are no in-network (INN) providers, so the member can see any prosthetic eye provider to receive INN benefits. Prior authorization (PA) is not needed.</li> <li>• Refer to the EOC. Copays depend on place of service.</li> <li>• Provider must bill per <a href="#">Medicare Product Grid</a>.</li> <li>• Medica is the only payer.</li> </ul>
Medicaid (SPP)	<ul style="list-style-type: none"> <li>• Covered under DME benefits.</li> <li>• <b>Note:</b> There are no in-network (INN) providers, so the member can see any prosthetic eye provider to receive INN benefits. Prior authorization (PA) is not needed.</li> </ul>
Prime	<ul style="list-style-type: none"> <li>• Covered under DME benefits.</li> <li>• <b>Note:</b> There are no in-network (INN) providers, so the member can see any prosthetic eye provider to receive INN benefits. Prior authorization (PA) is not needed.</li> <li>• Follows Medicare guidelines.</li> <li>• Provider must bill per <a href="#">Medicare Product Grid</a>.</li> <li>• <b>Reminder:</b> Members can use non-Medica Service Area providers. Refer to <a href="#">Out-of-MSA Benefits</a>.</li> </ul>
Select, Signature	<ul style="list-style-type: none"> <li>• Covered under DME benefits.</li> <li>• <b>Note:</b> There are no in-network (INN) providers, so the member can see any prosthetic eye provider to receive INN benefits. Prior authorization (PA) is not needed.</li> <li>• Medicare supplement. Medicare is the primary payer.</li> <li>• Follows Medicare guidelines.</li> </ul>

### Individual and Family Business (IFB)

Covered under *Prosthetic* benefits.

**Note:** There are no in-network (INN) providers, so the member can see any prosthetic eye provider to receive INN benefits. Prior authorization (PA) is not needed.

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## Eye Prosthetics, Continued

### Medica Health Plan Solutions (MHPS)

Covered under *Prosthetic* benefits.

**Note:** There are no in-network (INN) providers, so the member can see any prosthetic eye provider to receive INN benefits. Prior authorization (PA) is not needed.

### Document history

The document history for the past 12 months is outlined below. See Iris/KN for the complete document history.

Date	Description
8.18.20	Refreshed due to age.

### Applicability

<b>Business Segments</b>		
<input checked="" type="checkbox"/> All <input type="checkbox"/> AHP <input type="checkbox"/> COM-ISET <input type="checkbox"/> COM-HR <input type="checkbox"/> GOVT-ISET <input type="checkbox"/> GOVT-HR <input type="checkbox"/> IFB <input type="checkbox"/> MHPS <input type="checkbox"/> PSC		
<b>Specific Clients/Products</b>		
<input checked="" type="checkbox"/> All <input type="checkbox"/> Other:		
<b>System</b>		
<input type="checkbox"/> HealthRules <input type="checkbox"/> ISET (Choose an item.) <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Other:		
<b>Departments</b>		
<input checked="" type="checkbox"/> All <input type="checkbox"/> Billing <input type="checkbox"/> Call Center <input type="checkbox"/> Claims <input type="checkbox"/> Enrollment <input type="checkbox"/> Payment Integrity <input type="checkbox"/> Other:		
<b>Approved By</b>	<b>Document Owner</b>	<b>Date</b>
A-Z Review Team	KNTWs	8.18.20