

**Reasonable Limits on Amounts for Necessary Medical or Remedial Care Not Covered Under Medicaid**

The Medicaid Agency meets the requirements of 42 C.F.R. §435.725 and §435.832 and §1924 of the Social Security Act in that the agency will deduct amounts for incurred expenses for medical or remedial care that are not subject to payment by a third party, including necessary medical or remedial care recognized under State law but not covered under the State's Medicaid plan subject to reasonable limits as follows:

All remedial care or items, that are not covered by Medicaid but recognized under State law, must be prescribed by a physician, dentist, podiatrist or other practitioner with prescribing authority pursuant to West Virginia law. An annual maximum of \$300 may be deducted for eye examination and eyeglasses. Only two pair of eyeglasses will be permitted per year unless medical necessity is established for additional glasses. An annual maximum of \$3,000 per year may be deducted for dentures unless medical necessity is established for additional dentures. An annual maximum of \$1,500 for hearing aids may be deducted unless medical necessity is established for additional hearings aids. These annual maximums will be updated yearly for inflation utilizing the Consumer Price Index. Other items and services not herein enumerated must be medically necessary for the health and welfare of the recipient. The above listed items and services not covered under the State Plan, which were provided in the month of application and the three month time period prior to the month of application for Medicaid for nursing facility services, may be claimed as remedial medical expenses as well as current payments on old bills.

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