
ATTACHMENT J.20

INELIGIBLE RECIPIENT PROGRAM CODE

INELIGIBLE RECIPIENT PROGRAM CODES

If the recipient is enrolled in DC Medicaid under any one of the program codes listed below, the recipient is **NOT**, eligible for eye glasses or contact lenses in the Medicaid fee-for-service program.

<u>Program Code</u>			
010A	420	668	820C
010Q	460	678	830
010S	470	690	920
050A	470Q	720	928
050S	528	726	928G
120	538	730	930
130	606	755K	930Q
161M	607	760	938
161N	609	766	938E
161Y	618	774	938F
320	628	776	938G
330	638	780	960
360	648	780E	
370	658	820	