

Managed Care Organization (MCO) Vision Vendors

	Iowa Total Care	Molina Healthcare	Wellpoint
Vendor Used for Vision	Centene Vision	March Vision	Superior Vision
Contact Information			
Contact Information	Customer Service Number: 1-833-564-1205	Customer Service Number: 1-844-496-2724	Customer Service Number: 1-800-879-6901
Member Eligibility Applicable Vision Benefits	Eye Health Manager (available 24/7) http://www.centenevision.com/logon Verify member eligibility and benefits, file claims, review claim status, use audit tools, download, research, & reprint EOBs	March Vision Care website www.marchvisioncare.com	Superior Vision Secure Website https://superiorvision.com/eye-care-professionals/
Providers with questions about joining, contracts, or credentialing	Centene Vision Network Management 1-800-531-2818	March Vision Care Customer Service 1-844-496-2724 marchvisioncare.com/becomeprovider.aspx	Superior Vision Provider Support 1-877-235-5317 https://superiorvision.com/eye-care-professionals/

	Iowa Total Care / Centene Vision	Molina Healthcare / March Vision	Wellpoint / Superior Vision
Prior Authorization			
Prior Authorization Process	<p>Prior authorization is not required for Medically necessary eyewear or Vision Therapy.</p> <p>Both services may be subject to retrospective review.</p>	<p>Prior authorization is not required. A confirmation number can be obtained by the provider calling our Customer Service Department or using the Provider Portal.</p> <p>Provider portal: eyeSynergy</p>	<p>Vision Therapy Only:</p> <p>Provider contacts Superior Vision to initiate prior authorization request. Required form can be found on the Provider Portal (Forms).</p>
Forms	<p>Eye Health Manager (available 24/7) http://www.centenevision.com/logon</p> <p>Electronic Claims Submission: Change HealthCare Payer ID #56190</p> <p>Paper Claims Submission: Envolve Vision, Inc PO Box 7548 Rocky Mount, NC 27804</p>	<p>Prior authorization is not required. A confirmation number can be obtained by the provider calling our Customer Service Department or using the Provider Portal.</p> <p>March Vision Care Customer Service 1-844-496-2724 Provider portal: eyeSynergy</p>	<p>Logon to Provider Portal (Forms): https://provider.superiorvision.com/ Fax the form back to 410-752-9184</p>

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Billing			
Forms	<p>Eye Health Manager (available 24/7) http://www.centenevision.com/logon</p> <p>Electronic Claims Submission: Change HealthCare Payer ID #56190</p> <p>Paper Claims Submission: Envolve Vision, Inc PO Box 7548 Rocky Mount, NC 27804</p>	<p>Eyesynergy: Providers are encouraged to submit claims electronically via our web-based solution for electronic transactions Providers.eyesynergy.com</p> <p>Clearinghouse electronic claims: Payor ID for Optum is 52461.</p> <p>Paper Claims Submission: UnitedHealthcare I March Vision Care Attn: Medicaid Vision Claims PO Box 30989 Salt Lake City, UT 84130</p>	<p>Paper Claims Submission (CMS-1500): Superior Vision Claims Dept P.O. Box 967 Rancho Cordova, CA 95741</p> <p>Electronic Claims Submission: Logon to the Provider Portal (Forms): https://superiorvision.com/eye-care-professionals/</p>
Contact Information for Billing Issues	Centene Vision Customer Service 1-833-564-1205	March Vision Care Customer Service 1-844-496-2724	Superior Vision Customer Service 1-800-879-6901
Billing Support Contact	Centene Vision Customer Service 1-833-564-1205	March Vision Care Customer Service 1-844-496-2724	Superior Vision Customer Service 1-800-879-6901
Escalated Billing Issue	Centene Vision Customer Service 1-833-564-1205	March Vision Care Customer Service 1-844-496-2724	Superior Vision Customer Service 1-800-879-6901

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Eligibility			
Determine/Find Eligibility Information	Centene Vision's Eye Health Manager www.centenevision.com/logon Centene Vision Customer Service 833-564-1205	March Vision Care Customer Service 1-844-496-2724 Provider portal: eyeSynergy	Superior Vision's Web Portal https://provider.superiorvision.com/ Telephone IVR 1-866-819-4298 Customer Service Call Center 1-800-879-6901
Support/Account Executive			
Provider Support/ Account Executive	Centene Vision's Eye Health Manager www.centenevision.com/logon Centene Vision Customer Service 1-833-564-1205	March Vision Care Customer Service 1-844-496-2724 March Vision Care General website: www.marchvisioncare.com Provider Resources https://www.marchvisioncare.com/providerresources.aspx	Superior Vision's Provider Portal https://provider.superiorvision.com/ Provider Telephone IVR 1-877-235-5317 Melissa Willis Director, Client Management 1-518-220-6245 michelle.derry@versanthealth.com 1-518-872-7291
Referrals			
Options for Referrals	No referrals are applicable	No referrals are applicable	No referrals are applicable
Any provider?	No referrals are applicable	No referrals are applicable	No referrals are applicable
Specific provider?	No referrals are applicable	No referrals are applicable	No referrals are applicable
Referral Process	No referrals are applicable	No referrals are applicable	No referrals are applicable

Iowa Total Care / Centene Vision			
	Medicaid Vision Benefits	Hawki Vision Benefits	Iowa Health and Wellness Plan Vision Benefits
Covered Services			
Medical	Yes (Primary Eye Care Services)	Yes (Primary Eye Care Services)	Yes (Primary Eye Care Services)
Routine Eye Health	Yes	Yes	Yes
Materials (Frames and Lenses)	Yes	Yes (\$100 retail allowance for materials)	Not Covered; except for members 19 and 20 years old
Contacts	Yes	Yes (\$100 retail allowance for materials)	Not Covered; except for members 19 and 20 years old
Replacements	Yes	Not Covered	Not Covered; except for members 19 and 20 years old
Reimbursement			
Eye Exam	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less)	Provider's billed charges or exam rate on file with Envolve Vision for Hawki program (whichever is less)	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less)
Materials	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less)	\$100 retail eyewear allowance. Provider is reimbursed at percent of retail based on their contract agreement	Not Covered; except for members 19 and 20 years old
Replacements	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less)	Not Covered	Not Covered; except for members 19 and 20 years old

Molina / March Vision			
	Medicaid Vision Benefits	Hawki Vision Benefits	Iowa Health and Wellness Plan Vision Benefits
Covered Services			
Medical	Yes (When performed by an Optometrist and within the scope of licensure)	Yes (When performed by an Optometrist and within the scope of licensure)	Yes (Primary Eye Care Services)
Routine Eye Health	Yes	Yes	Yes
Materials (Frames and Lenses)	Yes	Yes (\$100 allowance to be used towards Materials)	Not Covered; except for members 19 and 20 years old
Contacts	Yes	Yes (\$100 allowance to be used towards Materials)	Not Covered; except for members 19 and 20 years old
Replacements	Yes	Not Covered	Not Covered; except for members 19 and 20 years old
Reimbursement			
Eye Exam	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less)	Provider's billed charges or exam rate on file with MARCH Vision for Hawki program (whichever is less)	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less)
Materials	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less)	\$100 retail eyewear allowance. Provider is reimbursed at percent of retail based on their contract agreement	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less) for members 19 to 20 years old
Replacements	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less)	Not covered	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less) for members 19 to 20 years old

Wellpoint / Superior Vision			
	Medicaid Vision Benefits	Hawki Vision Benefits	Iowa Health and Wellness Plan Vision Benefits
Covered Services			
Medical	Yes (Primary Eye Care Services)	Yes (Primary Eye Care Services)	Yes (Primary Eye Care Services)
Routine Eye Health	Yes	Yes	Yes
Materials (Frames and Lenses)	Yes	Yes (\$100 benefit for Materials)	No, except for members 19 to 20 years old
Contacts	Yes	Yes (\$100 benefit for Materials)	No, except for members 19 to 20 years old
Replacements	Yes	Not covered	No, except for members 19 to 20 years old
Reimbursement			
Eye Exam	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less)	Provider's billed charges or exam rate on file with Superior Vision for Hawki program (whichever is less)	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less)
Materials	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less)	\$100 retail eyewear allowance. Provider is reimbursed at percent of retail based on their contract agreement	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less) for members 19 to 20 years old
Replacements	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less)	Not Covered	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less) for members 19 to 20 years old