



NETWORK *Notification*

Notice Date: June 1, 2020
To: Indiana HHW/HIP Providers
From: CareSource
Subject: Superior Vision Frequently Asked Questions

Frequently Asked Questions:
CareSource Healthy Indiana Plan (HIP) and Hoosier Healthwise (HHW)

Question	Answer
What is the notification I received from Superior Vision?	Effective June 1, 2020 , Superior Vision will begin managing routine vision services on behalf of CareSource in your service area. Thus, any routine eye care professional claim should be filed with Superior Vision for services delivered on or after the effective date of the plan.
What services are being covered by Superior Vision?	Superior Vision will cover the professional services component of the routine eye care services in addition to the eyewear benefits. This does <u>not</u> include medical optometry or medical-surgical services which continue to be managed by CareSource at this time (ex. pediatric ophthalmology, cataract surgeries, etc). For those services, you should continue to follow your existing claim processing and billing arrangements.
How will I receive Prior Authorization for services?	To request Prior Authorization you can fax the request to 855-313-3106 or email the request to ecs@superiorvision.com with supporting clinical information regarding the member's condition to Superior Vision. All prior authorizations will be sent back within the applicable State regulatory timeframe. For expedited requests where the patient's condition warrants immediate care (appointment scheduled immediately), please mark urgent or expedited on the prior authorization form.
What services require prior authorization?	Prior authorization is required for certain services, including contact lenses. Please see the CareSource Indiana benefits grid.
What is the impact of this change?	As a result of this change, you will work with Versant Health on all administrative functions for routine vision services after June 1, 2020.
Do CareSource members have to enroll in Superior Vision?	No, members do not have to enroll with Superior Vision. Please note that members will remain with CareSource as their Managed Medicaid plan.
What do I need to do?	If you have not done so already, we encourage you to contract with Superior Vision directly as soon as possible. You can reach the

	Superior Vision Network Development department at 877-235-5317, with any questions.
Who do I contact to join the Superior Vision network?	If you have any questions regarding this program or participation in Superior Vision's network, please call the Superior Vision Network Development Department at 1(800)981-2435 or you can apply online at https://superiorvision.com/eye-care-professionals/join/ .
When do I find out about Superior Vision fee schedules, labs and frame coverage?	Eye care providers will receive a Superior Vision provider application package in the mail that includes these details. For additional questions, you can contact Superior Vision Network Development Department at 1(800)981-2435.
I have already signed a contract with Superior Vision, what is my status?	If you have already signed a contract with Superior Vision and need to know the status of your credentialing, please contact Superior Vision's Provider Relations Team at 877-235-5317 or via e-mail at prsupport@superiorvision.com .
I am still not credentialed with Superior Vision, what do I do?	Please contact Superior Vision regarding your participation status. You can reach Superior Vision's Provider Relations Team at 877-235-5317 or via e-mail at prsupport@superiorvision.com .
What happens if I do not enter into an agreement with Superior Vision?	Routine vision services are considered a self-referral service by Indiana Health Coverage Programs (IHCP). To receive reimbursement for routine vision services, a provider must be actively enrolled with IHCP. If a Provider has NOT signed a contract with Superior Vision, the provider will need to submit a paper claim form to ensure proper payment. Claims should be submitted to: Superior Vision Services P.O. Box 967 Rancho Cordova, CA 95670
What if I am already a provider with Superior Vision? Do I have to sign a new contract?	Please contact Superior Vision to verify your panel participation. You can reach Superior Vision's Provider Relations Team at 877-235-5317 or via e-mail at prsupport@superiorvision.com . Please note, you must have a Medicaid number to service Medicaid members.
How do I review eligibility and submit claims?	You will easily be able review eligibility and submit claims through the Provider Portal located at www.SuperiorVision.com once you have signed up. Claims can also be submitted via a clearinghouse. The clearinghouse Superior Vision uses is Change Health (formerly RelayHealth). Their payor ID is 41352 (formerly 3402).
Will referrals be required?	No. Superior Vision does not require referrals.
How do I update my provider information with Superior Vision?	If you are adding locations or updating any other demographic components, please complete the Provider Information Change form located on the Provider Portal at www.SuperiorVision.com or call our Provider Relations Team at 877-235-5317.
What is the process to submit claims or file an appeal?	You will easily be able to access all Provider education materials including the Provider Manual located on our Provider portal at www.SuperiorVision.com once you have signed up. If you would like a copy of our Provider Manual outlining claim submission details, you may request an electronic copy by calling our Provider Relations team at 877-235-5317.