



	Amerigroup of Iowa, Inc. / Superior Vision	AmeriHealth Caritas Iowa, Inc. / Avesis	UnitedHealthcare Plan of the River Valley, Inc. / Superior Vision
<b>Vendor Used for Vision</b>	Superior Vision	Avesis	Superior Vision
<b>Contact Information</b>			
<b>Member Eligibility Applicable Vision Benefits</b>	Superior Vision Call Center 800-879-6901	Avesis Provider Services 855-569-8338  Avesis Secure Website www.avesis.com  Avesis IVR 866-234-4806  Avesis Customer Service 855-569-8338  Fax Avesis Eligibility Verification Form to 855-691-2927	Superior Vision Call Center 800-879-6901
<b>Providers wanting to join program Question on contract, credentialing, or any other contract related items</b>	Mary Brittingham, Senior Network Development Specialist 443-451-2097 or 800-243-1401 x2097 mbrittingham@superiorvision.com	Cynthia Meraz, Provider Relations Representative cmeraz@avesis.com 800-522-0258 x11197	Mary Brittingham, Senior Network Development Specialist 443-451-2097 or 800-243-1401 x2097 mbrittingham@superiorvision.com



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<b>Prior Authorization</b>			
<b>Prior Authorization Process</b>	(1) Provider contacts Superior Vision to initiate prior authorization request. (2) Superior Vision forwards request to Amerigroup for review and determination	Providers are required to complete the prior authorization form and submit with members medical record via fax 855-591-3566 or email visionum@avesis.com	Provider contacts Superior Vision to initiate prior authorization request.
<b>Forms</b>	Superior Vision Website www.superiorvision.com	Avesis Portal www.avesis.com	No Forms Contact Superior Vision 800-879-6901

<b>Billing</b>			
<b>Forms</b>	CMS-1500 claim form (Paper) Superior Vision's Web portal (Electronic)	CMS-1500  Emdion/Trizetto electronic filing via clearinghouse  www.avesis.com	CMS-1500 claim form (Paper) Superior Vision's Web portal (Electronic)
<b>Contact information for billing issues</b>	Superior Vision Customer Service Call Center 800-879-6900	Cynthia Meraz, Provider Relations Representative cmeraz@avesis.com 800-522-0258 x11197	Superior Vision Customer Service Call Center 800-879-6900



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<b>Escalated billing issue process</b>	Mary Brittingham, Senior Network Development Specialist 443-451-2097 or 800-243-1401 x2097 mbrittingham@superiorvision.com	Anne-Marlyse Wood, Vision Provider Relations Manager 800-522-0258 x11866 awood@avesis.com	Mary Brittingham, Senior Network Development Specialist 443-451-2097 or 800-243-1401 x2097 mbrittingham@superiorvision.com
<b>Billing support contact</b>	Mary Brittingham, Senior Network Development Specialist 443-451-2097 or 800-243-1401 x2097 mbrittingham@superiorvision.com	Cynthia Meraz, Provider Relations Representative cmeraz@avesis.com 800-522-0258 x11197	Mary Brittingham, Senior Network Development Specialist 443-451-2097 or 800-243-1401 x2097 mbrittingham@superiorvision.com

<b>Eligibility</b>			
<b>Determine/ Find eligibility information</b>	Superior Vision's Web Portal www.superiorvision.com	Avesis Provider Portal www.avesis.com	Superior Vision's Web Portal www.superiorvision.com
	Telephone IVR 800-879-6900	IVR 866-234-4806	Telephone IVR 800-879-6900
	Customer Service Call Center 800-879-6900	Provider Help line 855-569-8338	Customer Service Call Center 800-879-6900



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Support/Account Executive			
<b>Provider Support/ Account Executive</b>	Mary Brittingham, Senior Network Development Specialist 443-451-2097 or 800-243-1401 x2097 mbrittingham@superiorvision.com	Cynthia Meraz, Provider Relations Representative cmeraz@avesis.com 800-522-0258 x11197	Superior Vision's Web Portal www.superiorvision.com Telephone IVR 800-879-6900  Mary Brittingham, Senior Network Development Specialist 443-451-2097 or 800-243-1401 x2097 mbrittingham@superiorvision.com

Referrals			
<b>Options for referrals</b>	No referrals are applicable	No referral needed for routine eye care services or eye medical/ surgical services	No referrals are applicable
<b>Any provider?</b>	No referrals are applicable	refer members to in-network provider	No referrals are applicable
<b>Specific provider?</b>	No referrals are applicable	The provider being referred must be in-network	No referrals are applicable
<b>Referral Process</b>	No referrals are applicable	Provider referring will facilitate the appointment or instruct the member to do so. If they need assistance locating a participating provider they can contact Avesis for assistance	No referrals are applicable



Amerigroup of Iowa, Inc. / Superior Vision			
	Medicaid Benefits	hawk-i Vision Benefits	Iowa Health and Wellness Plan Vision Benefits
<b>Covered Services</b>			
<b>Medical</b>	Yes (Primary Eye Care Services)	Yes (Primary Eye Care Services)	Yes (Primary Eye Care Services)
<b>Routine Eye Health</b>	Yes	Yes	Yes
<b>Materials (Frames and Lenses)</b>	Yes	Yes (\$100 benefit for Materials)	No, except for members 19 to 20 years old
<b>Contacts</b>	Yes	Yes (\$100 benefit for Materials)	No, except for members 19 to 20 years old
<b>Replacements</b>	Yes	Not covered	No, except for members 19 to 20 years old
<b>Reimbursement</b>			
<b>Eye Exam</b>	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less)	Provider's billed charges or exam rate on file with Superior Vision for hawk-i program (whichever is less)	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less)
<b>Materials</b>	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)
<b>Replacements</b>	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less)	Not Covered	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less)



AmeriHealth Caritas Iowa, Inc. / Avesis			
	Medicaid Vision Benefits	hawk-i Vision Benefits	Iowa Health and Wellness Plan Vision Benefits
<b>Covered Services</b>			
<b>Medical</b>	Yes	Yes	Yes
<b>Routine Eye Health</b>	Yes	Yes	Yes
<b>Materials (Frames and Lenses)</b>	Yes	Yes (\$100 benefit for materials)	No, except following cataract surgery and members between 19 and 20.
<b>Contacts</b>	Yes	Yes (\$100 benefit for materials)	No, except following cataract surgery and members between 19 and 20.
<b>Replacements</b>	Yes, but prior authorization is required for members 21 and over  members under 21 prior authorization is required after 2nd pair of replacement eyeglasses	Yes, as long as \$100 allowance has not been depleted	Yes, but prior authorization is required for members 21 and over (pertaining to members who have had cataract surgery)  members under 21 prior authorization is required after 2nd pair of replacement eyeglasses
<b>Reimbursement</b>			
<b>Eye Exam</b>	Iowa Medicaid Fee Schedule	Iowa Medicaid Fee Schedule	Iowa Medicaid Fee Schedule
<b>Materials</b>	Iowa Medicaid Fee Schedule	\$100 benefit - provider reimbursement based on negotiated contract rate.	Iowa Medicaid Fee Schedule
<b>Replacements</b>	Iowa Medicaid Fee Schedule	Iowa Medicaid Fee Schedule	Iowa Medicaid Fee Schedule



UnitedHealthcare Plan of the River Valley, Inc. / Superior Vision			
	Medicaid Vision Benefits	<i>hawk-i</i> Vision Benefits	Iowa Health and Wellness Plan Vision Benefits
<b>Covered Services</b>			
<b>Medical</b>	Yes (Primary Eye Care Services)	Yes (Primary Eye Care Services)	Yes (Primary Eye Care Services)
<b>Routine Eye Health</b>	Yes	Yes	Yes
<b>Materials (Frames and Lenses)</b>	Yes	Yes (\$100 retail allowance for materials)	Yes (Only available to members age 19 – 20)
<b>Contacts</b>	Yes	Yes (\$100 retail allowance for materials)	Yes (Only available to members age 19 – 20)
<b>Replacements</b>	Yes	Not Covered	Yes (Only available to members age 19 – 20)
<b>Reimbursement</b>			
<b>Eye Exam</b>	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less)	Provider's billed charges or exam rate on file with Superior Vision for <i>hawk-i</i> program (whichever is less)	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less)
<b>Materials</b>	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) available to members 19-20
<b>Replacements</b>	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less)	Not Covered	Current Iowa Medicaid reimbursement schedule or billed charges (whichever is less) available to members 19-20