



TO: Monroe Plan For Medical Care and YourCare IPA Providers of Vision Care Services to Molina Healthcare of NY Enrollees

FROM: Monroe Plan For Medical Care IPA Provider Relations Department

DATE: October 29, 2021

SUBJECT: Molina Healthcare of NY and Superior Vision

As you may be aware and previously notified by Molina Healthcare of NY (“Molina”), **effective November 1, 2021**, Molina will be using a new vendor to manage its vision benefit for members enrolled in its Medicaid Managed Care, Essential Plan, HARP, and Child Health Plus products. The name of the new vendor is **Superior Vision**.

The following is a synopsis of what this change will mean for any Monroe Plan or YourCare IPA providers (collectively the “IPA”) who provide any type of vision services to Molina enrollees.

PLEASE NOTE: If you do NOT provide vision services of any kind, there is no need or change for your practice and the following information is not applicable.

Please do not hesitate to contact us at providerrelations@monroeplan.com or Superior Vision at the referenced contact information below if you have any questions pertaining to this change.

New Vision Vendor as of 11/1/21

As of November 1, 2021, Superior Vision will manage the Routine Vision and Medical Optometry benefit for Medicaid/HARP, CHP, and Essential Plan members on behalf of Molina in New York. Therefore, any professional routine vision and eyewear claims should be filed with Superior Vision upon the effective date of the plan. As a result of this change, Molina Healthcare of New York will no longer manage the benefit for routine vision and Medical Optometry for Molina Medicaid/HARP, CHP, and Essential Plan members in New York on or after **November 1, 2021**.

Monroe Plan or YourCare IPA Contracted Providers

If you have NOT signed an agreement with Superior Vision but are contracted through the IPA to provide vision services, then your participation status and all business terms of your current agreement remain unchanged, including reimbursement rates and current credentialing status. Please continue to provide the IPA with any changes in your provider rosters, locations, and other demographic data.

However, there will be a change to your claims submission requirements for certain vision services, dependent on Provider Specialty and the type of service being provided. Please see below and the attached for a summary of the claims submission changes.

Please note that if you have been contracted with the IPA to provide vision services but have signed a contract with Superior Vision then the terms of that agreement will override your prior IPA agreement terms. In addition, if you did sign a Superior Vision agreement and need to know the status of your credentialing, then please contact Superior Vision's Customer Service at **(877) 235-5317**. Please contact Superior Vision to verify your panel participation as well.

Claims Submission For All Vision Providers (IPA or Superior Vision Based)

You will be able to review eligibility and submit claims through the Provider Portal located at www.SuperiorVision.com once you have signed up. Claims can also be submitted through a clearinghouse. The clearinghouse Superior Vision uses is Change Healthcare.

Payor ID: 41352 (formerly 3402).

Provider Portal (Superior Vision ®) | P: 866-819-4298| Superiorvision.com

Complaints and Appeals: Versant Health Complaints & Appeals Department | PO Box 791 Latham NY 12110

Paper Claims Submission: Attention: Claims Dept |PO Box 967 Rancho Cordova CA 95741

Submission Requirements By CPT-4 Code, Diagnosis, and/or Provider Type

Please note that with this change, certain claims, generally having to do with the provision of routine vision services by all providers, will need to be submitted to Superior Vision, while other claims, will continue to be submitted to Molina Healthcare NY as always.

The type of claims by CPT-4 code, diagnosis, provider type, and the entity that the claims should be submitted to (Molina or Superior Vision) are detailed in a spreadsheet that can be found on the IPA's website at [Monroe Plan > Provider > Provider Communications](#) (file name: **Molina NY-Superior Vision Final Vision Code Crosswalk For Claims Submissions 11012021.xls**).

Prior Authorization Requirements (New)

For a updated list of services that Molina and Superior Vision requires prior authorizations for please contact Superior Vision’s Customer Service at **(877) 235-5317** or log into your provider portal for a complete list. To request prior authorization for services please fax your request with supporting clinical information regarding the member’s condition to the following number: **855.313.3106** or secure e-mail to ecs@superiorvision.com. This information can also be found in the Superior Vision Provider Manual. All prior authorizations will be sent back within the 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.

Referrals are not required through Superior Vision.