



Envolve Vision is a leader in exceptional, tailored vision benefits and services for Medicaid, Medicare, and Marketplace member products. Every quarter we will share key news that you can use to best serve your patients.

Welcome Wellcare Medicare Patients!

Envolve Vision healthcare professionals have a vital role in helping Medicare patients navigate today's healthcare environment. You can best help patients avoid confusion and improve their experience by recognizing their health plan names.

Providers in your office with an Envolve Medicare* agreement are contracted to see Wellcare members. Please do not turn these members away.

Wellcare is the new face of Envolve's merged Medicare plans. The new branding, as shown on the ID cards, represents a new look for Wellcare. Please share this information with your team so they can easily recognize Wellcare and provide your patients with a positive experience.



* Exceptions: Wellcare Medicare plans in AZ, CA, OH, OR, and WA are administered by EyeMed, not Envolve. Please contact EyeMed for claims and eligibility in these locations.

New Website and Medicare Benefits Summary Tool

If you have not visited the brand new **envolvevision.com**, please check us out! We have completely overhauled our site with streamlined navigation, custom state pages, ID card copies, provider education, and a new simplified Medicare Benefits Summary tool.

With the **Medicare Benefits Summary** tool available on the public website, both providers and patients can quickly see basic vision benefit information associated with **Wellcare Medicare** and **Ascension Complete Medicare**. Simply select the state and enter the CMS# (e.g., H0000) printed on the patient's ID card.

To find this tool, select "Medicare Benefit Summary" from the Provider dropdown menu. Providers are encouraged to check information online before calling Customer Service, as many of your questions can be answered through the tool.

To verify a specific patient's eligibility and benefits, providers must log on to Envolve's secure **Eye Health Manager** portal.



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Cultural Competency is a Core Value for Envolve

Cultural competency is a set of behaviors, policies, and attitudes that harmoniously come together in a system, agency, or among healthcare professionals to bolster effectiveness in cross-cultural situations. It is the willingness and ability of a system to value the importance of culture in the delivery of services to all segments of the population.

To provide culturally competent and proficient medical services, providers must ensure that patients have access to medical interpreters, signers, and TTY services. Any services provided to facilitate communication are at no charge to the patient.

No Surcharges for PPE

Ensuring patients mask up is a wise move in any medical practice. However, providers may not charge Medicaid or Medicare patients for services that include fees to cover the costs of personal protective equipment (PPE) such as infection control, biohazard, or other miscellaneous fees.

PPE should be considered content of service. No existing policies allow these patients to be charged an additional fee for PPE.

Referrals Not Needed

As a reminder, referrals from a primary care physician (PCP) are not required for a patient to schedule an eye exam with any participating optometrist or ophthalmologist. Questions? Please contact Customer Service.

Help Improve Disability Access to Your Vision Practice

To improve healthcare access for patients with disabilities, **please participate in the Provider Accessibility Initiative (PAI)**. The goal of the PAI is to ensure that our members have the most up-to-date information on your location. Since this information is self-reported by you, your participation is especially valuable to the most vulnerable people in our communities.

The CDC reports that **26% of adults in the United States live with a disability**. Adults with disabilities carry additional barriers as well:

- 1 in 3 (ages 18-44) do not have a usual healthcare provider and/or have an unmet healthcare need due to cost
- 1 in 4 (ages 45-64) did not have a routine checkup in the past year

We understand how important your time is. We believe everyone deserves equal access to quality healthcare and services. You can help make that a reality and help new patients easily find your accessible practice. **Please fill out the survey**. It will make a world of difference to the patients who need the most help!

Appointment Wait Time and Access to Care

As part of Medicaid qualification, Medicaid providers are obligated to meet their state's established wait times. Our Quality Improvement Committee has established the following access to care standards for appointment wait times for eye doctors:

Type of Care	Texas	All Other States
Routine Eye Exam	Within 14 days	Within 2 weeks
Sub-Acute Problem	Within 14 days	Within 2 weeks
Chronic Problem	Within 21 days	Within 4 weeks
Urgent (not life-threatening)	Within the same office day	Within the same office day

Florida CMS Accessibility Standards

Florida Children's Medical Services (CMS) providers should ensure that services are available on a timely basis.

The timely access standards for Florida CMS providers are as follows:

- Urgent Care Services
 - > Within 24 hours of a request for services that do not require prior authorization
 - > Within 48 hours for a request for services that do require prior authorization



- Routine Sick Patient Care
 - > Within 7 days
- Primary Care
 - > Within 30 days
- Follow-up Services
 - > Within 30 days after assessment



Need to Update Your Office Hours?

During recent pandemic surges, your office may have changed office hours or closed some locations. Be sure to keep information current using one of the following methods. If your office has recently updated its hours please verify that these times are correct.

• Log in to our Eye Health Manager

- Complete and submit the <u>Online Provider</u>
 <u>Update Form</u>.
- Call your Customer Service number

Review Updated Clinical Policies

Envolve Vision's clinical criteria, provider manuals, policies and procedures are available by logging into Eye Health Manager at **envolvevision.com/logon**.

Once logged in, clinical policies are under *Provider Resources > Policies and Procedures > Utilization Management*. Important reminders, notices, plan specifics, and provider manuals can be found in the *Providers* and *Provider Resources* tabs. These are also communicated to providers via fax, mail, or email.

Clinical policies are reviewed quarterly and updated as needed.

NEW MARKET REMINDERS

Ambetter is Available in 27 States

Envolve now administers vision benefits to Ambetter members on the Health Insurance Marketplace in 27 states. In 2022, Envolve expanded pediatric and adult vision coverage to include **Kentucky**, **Louisiana**, **Nebraska**, **New Jersey** (pediatric only), and **Oklahoma**.

Check patient benefits and eligibility by calling Customer Service or log in at the **Eye Health Manager**.

ambetter.



VISION CARE BY THE NUMBERS

Envolve Vision Proudly Serves



About Envolve Vision

For more than 30 years, **Envolve Vision** has partnered with vision care providers across the country to administer eye care programs that meet the needs of our members. You are among 23,000+ unique eye care providers, including independent providers and popular retail chains, within our network. Thank you for partnering with us to provide quality vision services to your patients.

envolve Benefit Options



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