

# VISUAL EYES INSURANCE GUIDE

## BILLING TAX IDs

Your practice will file with Tax ID: 20-3844953, that will be listed on all insurance portals and claims. While processes will be updated with TeamVision's systems and support teams, it's important to know what TIN and Insurance portals you will be using to file claims and verify eligibility.

INSURANCE	POST INTEGRATION
Eyemed	File with Ciao! Optical.
All other carriers	File with Tax ID: 20-3844953

# MEDICAL BILLING PROCESS

Basden Eye Care will be the legal entity (tax ID) listed on all insurance claims. While processes will be updated with TeamVision's systems and support teams, it's important to know who will be filling claims by each carrier.

## MEDICAL INSURANCE

Carrier	Future State	Cash Posting
Medical & Medicare	<ul style="list-style-type: none"> <li>Collect all copays &amp; deductibles at the time of service</li> <li>Billed through RevolutionEHR &amp; Trizetto</li> <li>Medical biller to scrub claims and submit</li> <li>Using E.H.R. Invoice, enter services into Ciao! Optical</li> </ul>	Site/Medical Biller Posts in E.H.R.
Medicaid	<ul style="list-style-type: none"> <li>Collect all copays &amp; deductibles at the time of service</li> <li>Billed through RevolutionEHR &amp; Trizetto</li> <li>Medical biller to scrub claims and submit</li> <li>Materials filed through portal using frame kits</li> <li>Using E.H.R. Invoice, enter services into Ciao! Optical</li> </ul>	Site/Medical Biller Posts in E.H.R.

## MEDICAL POST SERVICE PAYMENTS (Patient Insurance Balances)

Payment Type	Future State	Cash Posting
<b>Card</b> Do not use in office card processor (Finix)	<ul style="list-style-type: none"> <li>Patient pays in office- use <b>Transaction Express</b> in Toolkit to collect payment</li> <li>Patient statement will direct patients to pay via practice website</li> </ul>	Site/Medical Biller Posts in E.H.R.
<b>Check</b>	<ul style="list-style-type: none"> <li>Patient pays in office- weekly <b>Mail Checks To T167</b> with patient statement</li> <li>Patient statement will direct patients to mail directly to T167</li> </ul>	Site/Medical Biller Posts in E.H.R.
<b>Cash</b> Do not accept cash	<ul style="list-style-type: none"> <li>Reach out to your biller if this is the only form of payment a patient can make.</li> </ul>	
<ul style="list-style-type: none"> <li>Medical billing will be held post integration until accounts &amp; systems set up (30-60 days).</li> <li>Reach out to your biller with questions.</li> </ul>		

# ROUTINE BILLING PROCESS

Basden Eye Care will be the legal entity (tax ID) listed on all insurance claims. While processes will be updated with TeamVision's systems and support teams, it's important to know who will be filling claims by each carrier.

You will meet your billing team during Integration Week.

ROUTINE VISION INSURANCE			
Carrier	In Ciao!	Future State	Cash Posting
VSP & Spectera	Bill Actual Plans	<ul style="list-style-type: none"> <li>• Site to enter services into Ciao! Optical</li> <li>• Mason Billing Department files claim</li> <li>• Print packing and mail frame to lab (within 72 hours of tender)</li> </ul>	Back Office (AS400)
	Auto Calculation Plans	<ul style="list-style-type: none"> <li>• Site to enter services into Ciao! Optical</li> <li>• Only available for Exams and Contact Lenses with a U&amp;C under \$1000</li> <li>• Must select correct plan in Ciao! Optical (Choice &amp; Copay), sperate authorizations (exam/materials), correct ID, primary details</li> <li>• Auto-files every Thursday 837 file</li> <li>• Site will be notified if claims denied</li> </ul>	Back Office (AS400)
EyeMed	Auto Calculation Plan	<ul style="list-style-type: none"> <li>• Ciao! Optical will file the claim</li> </ul>	Back Office (AS400)

# LABS

INSURANCE	LAB
Medicaid	Classic Optical
Eyemed, Spectera,	RxO
VSP	<b>New Southern Lab Accounts:</b> <i>*add to Eyefinity dropdown</i> T173 VisualEyes Tuscaloosa: 0215-058982 T174 VisualEyes Demopolis: 0215-058984 T175 VisualEyes Fayette: 0215-058985

## Lab Notes:

- Only insured/claimed eyewear orders may go to Insurance Required labs.
  - In LPA, mark as RxSun Authentic
- 2<sup>nd</sup> Pair or private pay orders will always go to RxO.

## Southern Lab Address:

1856 Corporate Dr # 150,  
Norcross, GA 30093

**PH:** 800-765-7343

# FRAME KIT UPCS

Medicaid Frame Kit UPC's	
Article Description	UPC
ACQ Consignment-adult OPT	20500002485125
ACQ Consignment-kids OPT	20500002485132
Safety Frame Kit UPC's	
Article Description	UPC
ACQ Consignment Safety-adult OPT	20500002485149
ACQ Consignment Safety-kids OPT	20500002485156

**Frame Kit Notes:**

- Do not inventory Frame Kits
- Reach out to the lab directly if you need assistance with your Frame Kit

**SEEN:**

- If using Seen Frames, use the individual **UPC on Frame**
- Transmit to RxO

## DISCONTINUED PLANS

- This is a list of plans that were previously accepted by your locations that will no longer be taken going forward.
- This decision was made due to low volume and credentialing efforts required. Dr. Basden, your primary Tax ID PC Leader, is not in network for these plans.

PLAN NAME
CHRISTIAN HEALTH AID
HEALTH EZ
UNWA
UNUM
NVA
COMMUNITY EYE CARE

# MEDICAL INSURANCE



# MEDICAL PLANS

- All Medical Plans in Ciao! Optical are Bill Actual, meaning you need to **invoice in RevolutionEHR**, account for patient copay payments and then **enter into Ciao! Optical**.
- INSURANCE BALANCE (Ins. Resp.) = PLAN PAYS in Ciao! Optical.
- In RevolutionEHR, **leave the insurance balance**. Claims will be filed from here through Trizetto and adjusted when the EOB is received. Billers will manage this.
- **USE MEDICAL PLANS IN CIAO! OPTICAL INSURANCE SEARCH TO BYPASS CLAIM FORM SCREENS.**

[CLICK HERE](#) to for step-by-step directions for Entering Medical Plans in Ciao! Optical.

PLAN NAME	PLAN ID	BILLING
MEDICAL-VIVA-BAS	1837688	Corporate
MEDICAL- CIGNA HEALTH SPRINGS-BAS	1840154	Corporate
MEDICAL- ASCENSION COMPLETE-BAS	1840155	Corporate
MEDICAL- UNITED MINE WORKERS-BAS	1840156	Corporate
MEDICAL MEDICARE-BAS	1837690	Corporate
MEDICAL HUMANA-BAS	1838178	Corporate
MEDICAL MEDICAID-BAS	1837691	Corporate
MEDICAL TRICARE-BAS	1837692	Corporate
MEDICAL BCBS-BAS	1837693	Corporate
MEDICAL CIGNA-BAS	1837694	Corporate
MEDICAL AETNA-BAS	1837695	Corporate
MEDICAL UHC-BAS	1837697	Corporate
MEDICAL CANOPY SOUTHLAND-BAS	1837689	Corporate
MEDICAL ROCK TENN-BAS	1840900	Site
MEDICAL DISABILITY SERVICES-BAS	1840901	Site
MEDICAL ROTC-BAS	1840902	Site
MEDICAL SUMTER COUNTY JAIL-BAS	1840903	Site
MEDICAL MARENGO CNTY SHERIFF-BAS	1840907	Site

# MEDICAID

**LAB:** CLASSIC OPTICAL (888) 522-2020

**BILLING:** Exam, Fitting Fee- E.H.R. Corporate

Materials – Classic Optical Portal – Site

**PLAN ID:** 1837691 – MEDICAL MEDICAID-BAS

\*See member benefit summary and attached fee schedules for additional details

- **All Medicaid materials will be billed by Classic Optical straight to the State of Alabama.**
- Use the Classic Optical frame kit and order complete pairs through the Classic Optical Web Portal. *If you do not have access to or need assistance with how to use the portal, please reach out to Classic directly at 888-522-2020.*
- The office receives an \$18 Fitting Fee.
  - **In Ciao! Optical:** Enter glasses as usual and put the \$18 fitting fee in the “Plan Pays” column on the Base lens. Use the frame kit UPCs below:

Medicaid Frame Kit UPC's	
Article Description	UPC
ACQ Consignment-adult OPT	20500002485125
ACQ Consignment-kids OPT	20500002485132

- **In RevolutionEHR:** Add “SV SPECTACLE FITTING” to the invoice. It can be on the same invoice as the exam and refraction if being serviced the same day.
- When using a Frame Kit, bypass RxO by selecting RX Sun Authentic in LPA

# COMMUNITY PLANS

MEDICAL ROCK TENN-BAS	1840900
MEDICAL DISABILITY SERVICES-BAS	1840901
MEDICAL ROTC-BAS	1840902
MEDICAL SUMTER COUNTY JAIL-BAS	1840903
MEDICAL MARENGO CNTY SHERIFF-BAS	1840907

- These plans will be **billed by the site** in the same way they were managed prior to integration (i.e. email, fax, paper mail, etc.).
- Treat the same as medical plans- **balances should be left in the EHR until payment has been received.**
- If materials are covered, they must be entered in the EHR (see MATERIALS IN E.H.R. in the Insurance Guide on Toolkit) with balances left until payment has been received.
- **Rock Tenn:** Only exam services should be billed under Rock Tenn with balances left in the EHR. Materials should be billed under Safe Vision in Ciao! Optical and ordered through HOYA the same way they were pre-integration.

# ROUTINE INSURANCE

## ROUTINE PLANS

- In **RevolutionEHR**, Apply Fee schedule to discount services and record as paid and **enter into Ciao! Optical**.
- **There should be no patient or insurance balances left in RevolutionEHR.**
- Select plans in Ciao! Optical are auto-calculation plans. Others are Bill Actual, meaning you need to reference the patient benefit summary and manually enter the copays, plan pay amounts and discounts into Ciao! Optical
- **INSURANCE BALANCE (Ins. Resp.) = PLAN PAYS** in Ciao! Optical.

PLAN NAME	PLAN ID	BILLING
EyeMed	Search Member	Auto-File
VSP-BAS	1837699	Corporate
SPECTERA-BAS	1837702	Corporate
DAVIS VISION-BAS	COMING SOON	Corporate
SUPERIOR VISION-BAS	COMING SOON	Corporate
SAFEVISION SAFETY-BAS	1837686	Site

[CLICK HERE](#) to for step-by-step directions for Entering Routine Plans in Ciao! Optical.

# VSP

## VSP Reimbursements

	SIGNATURE PLAN	CHOICE PLAN
Eye Examinations	PLAN PAYS	PLAN PAYS
Comprehensive Exam: New 92004   Est. 92014	\$53.60	\$52.40
Intermediate Exam: New 92002   Est. 92012	\$41.10	\$31.90
Refraction: 92015	\$13.40	\$13.10
Material Dispensing	PLAN PAYS	PLAN PAYS
Single Vision Lenses	\$30.98	\$14.00
Bifocal Lenses**	\$51.90	\$18.00
Trifocal Lenses	\$50.83	\$21.00
Lenticular Lenses	\$71.16	\$29.40
New Frame	\$44.05	\$17.00

**LAB:** Southern Labs, mark as Rx Sun Authenticity in LPA

### BILLING:

- Bill Actual: Site
- Auto-calculation: Auto file

### PLAN ID:

- 11837699 (Bill Actual Plan)
- Auto-Calc plans for Exams and Contact Lenses

### New Portal Logins:

- Fayette
  - User ID: 9325286205
  - Password: Update12
- Demopolis
  - User ID: 2890466
  - Password: Update10
- Tuscaloosa
  - User ID: 8612020205
  - Password: Update14

VSP offers additional reimbursement when you include diagnosis codes or select conditions on your VSP claims for patients with chronic conditions. For each patient, you can earn. Add applicable amount to Plan Pays – diagnosis codes must be on claim in Eyefinity if entered in Ciao! Optical

- Diabetes – \$5
- Diabetic Retinopathy – \$5
- High Cholesterol – \$2
- Hypertension – \$2

**EXAM PLAN PAYS = VSP REIMBURSEMENT – PATIENT EXAM COPAY + CHRONIC CONDITION**

**Auto-Calc plans would need to be edited.**

[Basden Eye Care Auto-Calc Plans](#)

# SAFEVISION

**LAB:** HOYA

**BILLING:** Site- fax to HOYA

**PLAN ID:** 1837686 SAFEVISION SAFETY-BAS

Safety Frame UPC for Ciao Entry: ACQ Consignment Safety-adult OPT **20500002485149**

	PATIENT PAYS	PLAN PAYS
Eyeglasses	Refer to patient form	\$25 Dispensing Fee (enter on base lens line in Ciao)

## General Guidelines:

- Patients must present Safety Authorization Form
- Refer to your patient's form for coverage details
- Safety plans will not auto-calculate in Ciao! Optical
- Must be Pentax Frames
- Always a complete pair provided by HOYA lab
- Send payment check to biller
- When using a Frame Kit, bypass RxO by selecting RX Sun Authentic in LPA
- Site will manage billing

# SPECTERA VISION

[Basden Eye Care Auto-Calc Plans](#)

**LAB:** RxO

**BILLING:** Mason

**PLAN ID:** 1837702 (Bill Actual) or Auto-Calculate

\*See member benefit summary and attached fee schedules for additional details

	PATIENT PAYS	PLAN PAYS					
Exam (92004, 92014, 92015)	Copay listed on Service Record Form	92004: \$54*	92012: \$37*	*reduce if copay			
		92014: \$48*	92002: \$41*				
		92015: \$8*					
CL Fit (92071, 92310, 92317, S0592)	Copay listed on Service Record Form *Specialty Contact Lens Fit = U/C- CL Fit allowance + patient copay	Standard Contact Lens Fit - \$30 (reduce if copay)					
Frames (V2020, V2025)	Allowance listed on Service Record Form	Up to 40% of the frame allowance					
Lenses	Copay & Allowances listed on Service Record Form	Single Vision	\$10	Progressives:	Transitions	\$10	
		Bifocals	\$12		Tier 1	\$20	AR Tier 1
	Additional lens options please see patient benefit form	Trifocals	\$14	Tier 2	\$40	AR Tier 2	\$15
		Polycarbonate	\$7	Tier 3	\$55	AR Tier 3	\$22
		High Index	\$19	Tier 4	\$80	AR Tier 4	\$32
		UV & Tint	\$4	Tier 5	\$100		
Contact Lenses	Allowance listed on Service Record Form	Up to 80% of the members allowance					



# REFERENCE TOOLS

## Lens Designs and Materials

Lens Designs	VCode	Line Item Price	EyeMed	VSP	UnitedHealthcare (Spectera)	Versant (Superior/Davis)	VBA
Eyezen® Kids	V2100*	\$190 (SV \$100 + \$90 DST)	Optimized Digital SV	Digital Aspheric + LF1	Non-Formulary (80% U&C Pricing)	Digital SV	Digital SV 1
Eyezen® Start™	V2100*	\$240 (SV \$100 + \$140 DST)	Optimized Digital SV	Digital Aspheric + LF1	Non-Formulary (80% U&C Pricing)	Digital SV	Digital SV 1
Eyezen® 1-4	V2100*	\$250 (SV \$100 + \$150 DST)	Optimized Digital SV	Digital Aspheric + LF1 + TA2	Non-Formulary (80% U&C Pricing)	Digital SV	Digital SV 1
Eyezen® SunFit	V2100*	\$155 (SV \$100 + \$55 DST)	Optimized Digital SV	Not Covered	Not Covered	Not Covered	Not Covered
SunFocus Single Vision (Shamir Attitude III)	V2100*	\$100	Optimized Digital SV	Not Covered	Not Covered	Not Covered	Not Covered
SunFocus Progressive (Shamir Attitude III)	V2200* + V2781	\$295	Tier 4	Not Covered	Not Covered	Not Covered	Not Covered
Varilux® SunFit	V2781	\$295	Tier 4	Not Covered	Not Covered	Not Covered	Not Covered
Varilux® XR Track Fit™	V2781 V2702 CM for VSP	\$565	Tier 5 (Innovations)	Category N + CM3 + TA2	Non-Formulary (80% U&C Pricing)	Not Covered	Not Covered
Varilux® XR Fit™	V2781 V2702 CM for VSP	\$500	Tier 4	Category N + CM3	Tier V	Ultimate	Premium Progressive 4
Varilux® Comfort Max Fit	V2781 V2702 CM for VSP	\$312	Tier 3	Category O + CM3	Tier III	Ultra	Premium Progressive 3
Premium Progressive (Essilor Accolade)	V2781	\$210	Tier 1	Category K	Tier II	Premium	Premium Progressive 1
Premium Progressive (Essilor Ideal)	V2781 V2799 for VSP	\$260	Standard	Category K	Tier I	Standard	Standard
Shamir Workspace™ or Shamir Computer™	V2200*	\$295	Tier 3	Near Variable Focus	Tier I	Not Covered	Near Variable Focus
WrapPlus (Private Label - Attitude III Fashion)	V2781	\$400	Tier 4	Category O	Not Covered	Ultimate	Premium Progressive 2
Standard Progressive (Ovation Digital)	V2781	\$165	Standard	Category K	Tier I	Premium	Premium Progressive 1

\*Note-this is the start of the Vcode range for the focal type

Note that for Computer PG glasses, these are typically purchased as a secondary pair. Leverage the 40% Off Additional Pairs when applicable.

1 VSP Code LF = Light Filter  
2 VSP Code TA = Technical Add-On

## REFERENCE TOOLS

### Lens Designs and Materials

Lens Materials	VCode	Line Item Price
Plastic	V2782	\$0
Polycarbonate	V2784	\$50
Hi-Index 1.67	V2783	\$145
Hi-Index 1.74	V2783	\$240
Frame	V2020	

Other Lens Designs	VCode	Line Item Price
Digital (DST) SV	V2100	\$160 (SV \$100 + \$60 DST)
Conventional Spheric SV	V2100	\$100
Conventional Aspheric SV	V2100	\$100 (SV \$80 + \$20 ASP)
Bifocal	V2200-2214	\$165
Trifocal	V2300-2399	\$165

# REFERENCE TOOLS

## Coatings, Light Filters, and Add-Ons

Coatings and Light Filters	VCode	Line Item Price	EyeMed	VSP	UnitedHealthcare (Spectera)	Versant (Superior/Davis)	VBA
Crizal® Sapphire™ HR	V2750 V2755 EM/VSP	\$185 (\$170 + \$15 BS UV)	Tier 3 + BS UV	Category D + BS UV	Tier IV	Ultimate	Ultra
Crizal® Preveencia®	V2750 V2755 EM/VSP	\$185 (\$170 + \$15 BS UV)	Tier 3 + BS UV	Category D + BS UV	Tier IV	Ultimate	Ultra
Crizal® Rock™	V2750 V2755 EM/VSP	\$175 (\$160 + \$15 BS UV)	Tier 3 + BS UV	Category D + BS UV	Tier IV	Ultimate	Premium AR 2
Crizal® Easy Pro™	V2750 V2755 EM/VSP	\$125 (\$110 + \$15 BS UV)	Tier 2 + BS UV	Category C + BS UV	Tier III	Ultra	Premium AR 1
Crizal® Sunshield UV	V2750 V2755 EM	\$125 (\$110 + \$15 BS UV)	Tier 2 + BS UV	Category D	Tier IV	Premium	Not Covered
Crizal® Sunshield Mirrors UV	V2750 V2755 EM	\$110 (\$95 + \$15 BS UV)	Tier 3 + BS UV	Category D (QP+QV)	Tier IV	Premium	Not Covered
Premium+ AR	V2750 V2755 EM/VSP	\$150 (\$135 + \$15 BS UV)	Tier 3 + BS UV	Category D + BS UV (Lab Choice)	Tier IV	Ultimate	Premium AR 2
Premium BS AR	V2750	\$110	Tier 2	Category C (Lab Choice)	Tier III	Ultra	Premium AR 1
Ray-Ban® (Ray-Ban® Sun AR UV)	V2750	\$45	Standard	Not Covered	Tier I	Not Covered	Not Covered

Additional Coatings and Light Filters	VCode	Line Item Price
Backside UV	V2755	\$15
Blue Light (VSP: LF)	V2799	\$60
Polarization	V2762	\$85
Solid tint	V2745	\$25
Gradient tint	V2745	\$30
Mirror	V2761	\$90
Transitions® GEN S™	V2744	\$142
Transitions® XTRActive®	V2744	\$165
Transitions® XTRActive® Polarized™	V2744	\$250 (\$165 + \$85 Polar)
Scratch Resistant Coating	V2760	

Add-Ons	VCode	Line Item Price
Deluxe Frame	V2025	
Oversize Frame (VSP 61 eye size or greater)	V2780	\$15
Roll & Polish		\$40
Polish		\$25
Rimless Drill		\$70
Balance Lens	V2700	
Deluxe Lens Feature	V2702	
Slab Off Prism	V2710	
Prism, per lens	V2715	
Oversize lens	V2780	

## REFERENCE TOOLS

### Exam and Diagnosis Codes

Exam Codes	
92014, 92004	Comprehensive Exam
92012, 92002	Intermediate Exam
92015	Refraction

Diagnosis Codes	
<b>Hyperopia</b>	
H52.00	Unspecified Eye
H52.01	Right Eye
H52.02	Left Eye
H52.03	Bilateral
<b>Myopia</b>	
H52.10	Unspecified Eye
H52.11	Right Eye
H52.12	Left Eye
H52.13	Bilateral
<b>Regular Astigmatism</b>	
H52.229	Unspecified Eye
H52.221	Right Eye
H52.222	Left Eye
H52.223	Bilateral
<b>Irregular Astigmatism</b>	
H52.219	Unspecified Eye
H52.211	Right Eye
H52.212	Left Eye
H52.213	Bilateral