

July 27, 2007

Dear Provider:

Avesis would like to thank you for your continued participation in the Avesis Georgia Medicaid program that began in June 2006. Avesis is dedicated to making the Medicaid program in Georgia work for all of our partners: the Members, Providers, CMOs and the Department of Community Health. To accomplish this, it is necessary that we make some modifications to the program as it exists today. The following is an explanation of upcoming changes to the Avesis Georgia Medicaid program for **WellCare** members and the dates for implementation:

Effective **08/01/2007**, the Avesis Georgia Medicaid vision program for **WellCare** members has been modified to become a Routine Vision and Materials Program Only. Avesis will be responsible for managing and paying for services that pertain to the Annual Routine Vision Benefits. Avesis will no longer be responsible for the payment of medically necessary ophthalmologic services for **WellCare** members.

The administrative changes are as noted below:

ROUTINE VISION PROGRAM

Avesis will continue to pay for visits consisting of routine vision diagnosis, spectacle frames and lens materials required to correct visual acuity for Medicaid and PeachCare **children** (under the age of 21). Effective 08/01/2007, adult (ages 21 and over) members will experience a benefit change that will affect their availability for materials (noted below).

MEDICAL VISION SERVICES

All medically necessary ophthalmologic services should be billed directly to WellCare. If you are going to supply medical services to WellCare members you must first contract directly with WellCare and become a credentialed provider on the WellCare provider panel. For contracting information please contact:

WellCare of Georgia, Inc.
Attn: Network Development
211 Perimeter Center Pkwy 8th Floor
Atlanta, GA 30346
Or call 678--327-0939 and speak with Network Development.

ADULT ENHANCED BENEFIT

WellCare adult (ages 21 and over) members are entitled to an annual eye exam and may be entitled to spectacle materials under their benefit plan.

- Avesis now requires prior authorization for WellCare adult spectacles and will only approve spectacle **materials** that have a minimum refractive error of +/- 1.00.
- You must obtain prior authorization by faxing an authorization form to our Utilization Management department. The authorization request should indicate that the request is for adult enhanced benefit materials, have both the member's and your demographic information and the member's prescription. If the member is eligible and approved for the service, you will receive an authorization number. This number is acknowledgement that the member is eligible to receive the requested benefit based on the documentation submitted.
- WellCare adults continue to be responsible for a \$10 co-pay for the Routine Vision Exam.

VISION NETWORK PANEL

As of June 1, 2007 and until further notice, Avesis will no longer be admitting new provider locations to the network for the Avesis Georgia Medicaid Vision Plan. Providers who submitted applications prior to that date and have applications in process will not be affected by this change. Changes in providers

(Adds, changes, and terminations) at currently participating locations will be accepted and processed. If your proposed new location services an underserved area please contact me directly to discuss the possibility of adding your new location.

ELIGIBILITY VERIFICATION

During the first year of the program, Avesis mandated that providers obtain "approval codes" for members' eligibility and benefits prior to rendering services. Avesis paid claims based on issuance of that approval code, even if a Member was not eligible, or had already used the benefit. Due to the administrative burden this process caused many offices we have eliminated this requirement. As of June 1, 2007, Avesis will no longer issue approval codes for eligibility verification. To ensure correct payment it is strongly encouraged that you verify eligibility for each Member's appointment the business day prior to rendering services and that you submit your claim immediately after rendering services. Member eligibility and benefit coverage can be verified by logging onto our web site at www.avesis.com, utilizing our interactive voice response system at (866) 234 – 4806, calling in to our customer service unit at (800) 231 - 0979, or requesting information via faxback system at (800) 332 - 1632.

Please see your provider manual for more information.

Please note that verification of benefits or eligibility is not a guarantee of payment: actual payment is based on the terms and conditions of the plan in force once the claim is received.

PROGRAM INTEGRITY

As part of our commitment to the clinical and financial integrity of our Medicaid program, Avesis has begun a program of office and chart reviews. We would appreciate your cooperation with our staff when scheduling a convenient time for the review.

Avesis has become aware of some offices billing for services that were performed in a different location or were rendered under the provider number for a provider other than the one who actually performed the service. All offices should confirm that the provider who treated the Medicaid member is the provider whose name appears on the claim submitted as well as the correct location the service was rendered. Please understand that this will be one of the key issues that we will consider when reviewing your office's claims during a chart review. Any office in violation will be required to refund payments for incorrectly billed services.

UPDATED FORMS

Avesis has revised our Provider Manual to reflect the changes contained in this document. In addition, based on feedback from our provider community Avesis has updated many of the provider forms for the Avesis Georgia Medicaid Vision Plan. Those forms include new order forms for materials, eligibility confirmation via fax, and requesting prior authorization. Please visit our website at www.avesis.com to obtain the new Provider Manual and these new forms. If you do not have web access, you may call in to Provider Services for the form to be sent to you via mail or fax.

If you should have any questions please contact Avesis Provider Services at (800) 231-0979.

As always, thank you for your participation in the Avesis Georgia Medicaid network and we look forward to continuing our relationship with your office.

Sincerely,



Nichole Mitchell
Manager of Medicaid Services