

Ameritas – Colorado

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EyeMed Provider Network Access  
Plan

Insight Network

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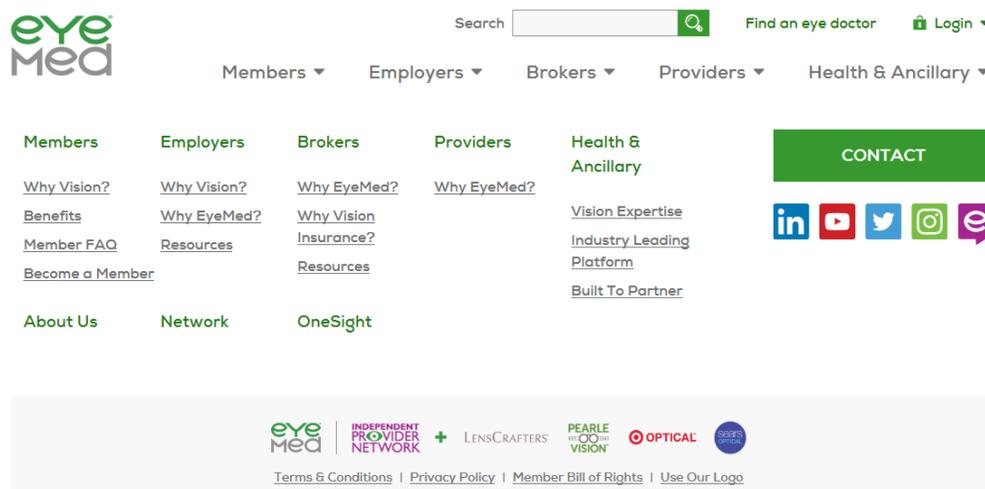
# 1. Introduction to this access plan

EyeMed Vision Care, LLC. (EyeMed) owns the managed vision provider networks that health plans licensed to sell vision insurance in Colorado lease from EyeMed. EyeMed offers four networks to its contracted health plans. The four networks are Access, Advantage, Insight and Select. Some health plans elect to build a customized network from the EyeMed network provider base. Qualified vision providers choose to participate in an EyeMed network and agree to provide eye care services and supplies in a manner that complies with EyeMed, Colorado and federal requirements.

The DOI requires our health plans to provide you with a Network Access Plan for each network offered by EyeMed. Network access plans are public documents that describe health plan policies and procedures for maintaining and ensuring that their networks are sufficient and consistent with state and federal requirements. The EyeMed Access plan describes how we build, maintain and provide our networks to provide eye care and supplies to you through your vision insurance. #

This EyeMed Network Access Plan applies to this network: Insight

Your instant access to the EyeMed and the EyeMed network is by [www.eyemed.com](http://www.eyemed.com). You don't have to be a member to find an eye doctor, to understand how plans works or check out member rights and responsibilities. When you log on as a member, you have access to information about your vision benefits that are not available to the general public or anyone else.



Most health plans offer you an id card that summarizes your plan benefits, contains your vision plan's website and phone number.

On the other hand, contact EyeMed via email through <https://eyemed.com/en-us/contact-us> or by phone 1-866-939-3633. The Customer Care Center operation hours are Monday-Friday 7:30 a.m. -11 p.m, Saturday 8:00 a.m. - 11 p.m, and Sunday 11 a.m. - 8 p.m. Want to

write a letter? EyeMed Vision Care, LLC at 4000 Luxottica Place Mason, OH 45040, attention Quality Assurance. For language assistance, call 1.888.249.5194 at no additional cost. Access TTY services by dialing 711. For alternate formats, call 1.866.939.3633.

## **2. Find an eye doctor (Provider directory) – Resources and Referrals**

You have access to many providers across the nation; you can see who you want to see, when and where you want to see them. You do not need an authorization or referral to seek eye care services or materials. If a referral is required, the member can reference his or her health plan for assistance finding an in-network provider to provide the referred services. When you choose to use an EyeMed provider, you know that both you and the provider have access to information about your vision plan and everyone is on the same page. You also have rights and the opportunity to complain to EyeMed, who cares if something goes wrong. If you choose to use an out-of-network provider, check first to make sure you have an available benefit before you go and understand that EyeMed cannot assist if a problem arises. Whether it's an independent eye doctor, a local vision retailer or eyewear supplier online, you have choices.

The best place to find an eye doctor is on [www.eyemed.com](http://www.eyemed.com) or your vision plan website. Just click on find an eye doctor or locate a provider. The online provider directory is the best place to go because we update the information daily. Enter the zip code to narrow your choices to the place you want to start. You can narrow the zip code search to a network, provider name, specialty, languages spoken, new patient acceptance, gender, hours & scheduling and more.

The location display lists all of the locations near the zip code, mileage to the location, the address, days and hours of operation, accessibility for disability and you can map selected providers. Click the name of the provider to see more. The provider information displayed includes but is not limited to provider name, location, address, phone, miles from the central point of the zip code searched, accessibility for disability, email address, gender, languages spoken, education, accepting new patients, board credentials and certifications, primary state license number, NPI number and a map.

**Want a printed copy?** Click on the email or print button.

**Need help?** Email through <https://eyemed.com/en-us/contact-us> or call the number on your ID card or 1.866.939.3633. We will send you the requested zip code directory within 5 business days of receipt. For language assistance, call 1.888.249.5194 at no additional cost. Access TTY services by dialing 711. For alternate formats, call 1.866.939.3633.

**Found something wrong with the information on the directory?** Report directory inaccuracies in the provider locator by emailing [directorydata@eyemedonline.com](mailto:directorydata@eyemedonline.com) or calling 1-866-939-3633. If you believe that you relied upon materially inaccurate, incomplete or misleading directory information please submit your complaint by emailing [eyemedqa@eyemedvisioncare.com](mailto:eyemedqa@eyemedvisioncare.com).

### 3. How we build and maintain your provider network

#### How we build our vision networks

Our network of eye doctors includes thousands of independent providers, popular retailers and online options so you can see who you want to see, where and when you want to see them. We build our networks based on how many providers there are in a specific area and the provider's ability to meet network participation standards. We reimburse providers a contractual fee for each service they provide. This way we can ensure that we have enough providers available to meet your routine vision care needs.

#### How we choose providers

We created the vision network based on numerous market variables. We chose providers for this network based on the following criteria:

- access and availability
- meets our credentialing standards
- provider ability to meet network participation criteria
- cost efficiency

#### Telemedicine

Telemedicine may be helpful to provide access to care to under-served populations, specifically members who live in geographies without reasonable access to conventional eye care practices. EyeMed will contract with telemedicine providers only when specific requirements are met. Telemedicine providers will be held to the same standards of appropriate care as, and the level of care must be equal to, providers offering in-person service.

#### Quality assurance procedures

All providers must complete credentialing before joining our network. We require re-credentialing every three years. Between credentialing cycles, we monitor the following as part of the ongoing quality review:

- state board sanctions
- loss of license
- office of personnel management/office of inspector general reports
- state and federal program exclusion lists
- Medicare opt out

#### Network maintenance

Our network providers are the source of the provider information in this directory and responsible for information accuracy. Updates received from our network providers are added to the EyeMed Provider Locator once per day, including weekends and holidays. Exclusions include interruptions due to system maintenance, upgrades or unplanned outages. This information is subject to change at any time. Should you elect to use a printed subset of the directory, keep in mind that the printed directory is only accurate as of the date printed and limited by the search filters? The website provider locator is the most current and complete provider directory. Network administration services are provided through EyeMed Vision Care, LLC 4000 Luxottica Place Cincinnati, OH 45040.

## 4. How we monitor network adequacy

We monitor our networks to ensure that they have enough providers for you to schedule an appointment within the EyeMed requirement of 14 days, the DOI’s standard of scheduling an appointment within 60 days 90% of the time and federal requirements. We create recruitment plans when we know that we want more access for you.

- The Insight network in Colorado is sufficient for over 99% of all members. The Insight network meets the Colorado requirement that 90% of members have access to at least one provider within required time and distance standards.
- The Insight network in Colorado meets or exceeds the Colorado Network Adequacy Access to Service and Waiting Time standard of 60 calendar days.

When we have difficulty recruiting or there are simply no providers available in near your zip code to recruit, we will pay your out-of-network claim at the in-network level of benefit. We measure travel time and mileage using the DOI standards for vision providers. When we do not have any providers in your zip code, the online provider directory advises you of this fact and provides a link to the member out-of-network form. Please note that this option is not available when you choose to use an out-of-network provider due to your choice when there are available providers in your location.

You can obtain a quality eye exam from any available network provider. Routine vision does not need continuity of care provisions to finish a course of treatment like you might need from your medical primary care or specialty provider. All EyeMed network providers are required to refer you to seek medical eye care for injuries or illness to a medical provider in your medical plan network. The Member Bill of Rights reminds you of your responsibility to know where to seek medical eye care. Broken glasses or lost contacts are not eye care emergencies.

Provider Type – the plan provides access to at least one vision provider for at least 90% of the enrollees	Geographic Type				
	Large Metro	Metro	Micro	Rural	CEAC
	Maximum Road Travel Distance (Miles)				
Ophthalmology	10	20	35	60	85
Optometry	10	20	35	60	85
Other Vision Providers	10	20	35	60	85

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NO LOCATIONS FOUND. Due to the limited providers available nearby, you may be eligible to submit an out-of-network claim form to receive the in-network level of benefit. Log-in to your Member Web account to obtain the Out-of-Network Claim Form, which includes additional information and requirements.

## 5. How we monitor and set standards for network quality

Our quality program watches network provider quality through safeguards to prevent your dissatisfaction.

- Network sufficiency
- Member complaints and telephone satisfaction surveys
- Provider satisfaction surveys and provider disputes
- Prompt payment of claims and claim error rates
- Call center call abandonment rates, average speed of answer and other factors
- Provider billing patterns for potential fraud, waste or abuse
- Publication of provider choices to not honor discounts on non-covered services or use lower cost network optical labs
- Screenings to identify providers who are sanctioned or excluded from accepting federal funding
- Credentialing at application and rechecks every 3-years to make sure they are qualified
- Annual compliance education and collection of compliance attestations
- Provider contracts and provider manual that clearly state requirements and expectations.

## 6. How we inform you of your rights

Like any great relationship, understanding who brings what to the table can make all the difference. As a member, you have certain rights and protections to make coverage fair and easy to understand. You also have responsibilities to us and to the providers that are part of our network.

**Member Bill of Rights.** EyeMed informs you of your rights and responsibilities in the Member Bill of Rights available on [www.eyemed.com](http://www.eyemed.com) at the bottom of every page. It reminds you that you have the right to complain, send your plan a grievance and appeal a denial of your benefit and contains links to email addresses and phone numbers to access those rights and others. Your explanation of benefit statements also contains claim appeal instructions when your plan denies or reduces your benefit and tells you why.

**Colorado DOI contact.** In addition to the grievance and appeal opportunities that your vision plan offers, the Colorado Division of Insurance provides you with an online compliant portal at [www.dora.colorado.gov/insurance](http://www.dora.colorado.gov/insurance) and contact information to call them at 1.303.894.7490 in the Denver metro area or 1.800.930.3745 for those outside Denver metro. Or, write them a letter at Division of Insurance, Colorado Department of Regulatory Agencies, 1560 Broadway, Suite 850, Denver, CO 80202. The DOI asks that you first exhaust all of your plan opportunities to settle a grievance or appeal before contacting them for assistance.

**Applicable law.** EyeMed, its health plans and network providers do not consider an individual's race, disability, religion, sex, sexual orientation, health, ethnicity, creed, age or national origin when providing access to care. Each of us complies with DOI and federal laws to prevent discrimination.

- Title VI of the Civil Rights Act of 1964
- Age Discrimination Act of 1975
- Americans with Disabilities Act
- Laws that apply to those who receive federal funds
- All other laws that protect your rights to receive health care

Network Providers are required to provide services in a culturally competent manner to all members, including those with limited English proficiency or reading skills, diverse cultural and ethnic backgrounds, physical and mental disabilities and health conditions. Annual cultural competency training is required to help providers and staff members understand how to deliver care across cultures and patients with disabilities.

## **7. Hold harmless.**

Network provider contracts contain a “hold harmless” provision. This prevents network providers from balance billing you in the event of the health plan’s insolvency or inability to continue operations.

## **8. EyeMed business interests**

EyeMed is part of EssilorLuxottica, which has business interests in frame and lens manufacturing and retail outlets. #