



NETWORK *Notification*

Notice Date: July 19, 2023
To: Ohio Medicaid Providers
From: CareSource
Subject: Payment for Determination of Refractive State (92015)
Effective Date: May 12, 2023

Summary

CareSource partners with Versant Health to cover vision services for our Ohio Medicaid members. Optometry providers were encouraged to contract directly with Superior Vision in prior communications from CareSource.

Due to an increase in claims billed to CareSource that should be billed to Superior Vision (Versant Health), this notification is intended to offer further information to providers.

Impact

Claims billed directly to CareSource for routine eye care will be denied with a denial code instructing providers to bill other payer.

Procedure code 92015 (determination of refractive state) must be billed to the vision vendor when the claim involves any of the below diagnosis codes:

- **Procedure Code:** 92015
- **Diagnosis Codes:** H52.00, H52.01, H52.02, H52.03, H52.10, H52.11, H52.12, H52.13, H52.201, H52.202, H52.203, H52.209, H52.211, H52.212, H52.213, H52.219, H52.221, H52.222, H52.223, H52.229, H52.31, H52.32, H52.4, H52.521, H52.522, H52.523, H52.529, H52.531, H52.532, H52.533, H52.539, H52.6, H52.7, H53.141, H53.142, H53.143, H53.149, H53.50, Z01.00, Z01.01, Z46.0

Questions?

If you have questions regarding this notice, please contact Provider Services at **1-800-488-0134** (Monday through Friday, 8 a.m. to 6 p.m. Eastern Standard Time).

For questions regarding this program, or participation in the Superior Vision network, please call Superior Vision's Network Development department at 844-353-2900, option 2; or visit the Superior Vision [website](#).

We appreciate your continued participation in support of our members.

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