



# NETWORK Notification

**Notice Date:** January 16, 2026  
**To:** Indiana Medicaid Providers  
**From:** CareSource  
**Subject:** Routine Vision Benefits  
**Effective Date:** March 1, 2026

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## Summary

**Beginning March 1, 2026**, CareSource will contract with EyeMed to administer the routine vision benefit on behalf of CareSource for all Indiana Medicaid members. Versant/Superior Vision will no longer administer the routine vision benefit as of this date.

Please note that the medical vision benefit will still be administered by CareSource. EyeMed will only administer the routine vision benefit.

## Impact

### Claims

For dates of service on or before February 28, 2026, please continue to submit claims to Versant/Superior Vision. For dates of service March 1, 2026 or later, claims should be submitted to EyeMed.

Claims mailing address:

EyeMed VisionCare  
P.O. Box 8504  
Mason, OH 45040  
EDI Payer ID 31165

## Importance

### Plan Details

Member benefits are not changing. Use the EyeMed online claims system to determine the individual member's plan information, benefit coverage, exam frequencies, copays (if applicable) and allowances for frames/lens packages or contact lenses.

## Questions

- [Email](#) or call EyeMed at 1-888-581-3648 during normal business hours (8 a.m. to 11 p.m. Eastern Time (ET), Monday through Saturday and 11 a.m. to 8 p.m. ET on Sunday.)

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