



We heal and inspire the human spirit.

To: All IEHP Vision Providers  
From: Provider Relations  
Date: September 27, 2024  
Subject: UPDATED Vision Lab Form Now Available & FAQ

The updated **Vision Lab Form** has been posted to our website. **PLEASE NOTE:** The process is not changing.

**To prevent delays caused by handwritten notes, please utilize the fillable PDF form,** noting the following changes:

1. Please use this form for IEHP DualChoice (HMO D-SNP) and IEHP Covered (CCA) lines of business.
2. “Glass” removed under Material
3. “PGX” removed under Tint
4. New Add-Ons:
  - 1.60 S0581-Sv/S0581-BI
  - 1.67S0581-Sv/S0581-BI
5. “Spectralite” removed from Add Ons

**NOTE:** Continue to use PIA for all lab requests for Medi-Cal Members. Pre-approved exceptions to utilize Express Lens/Unique Optical will be considered on a case-by-case basis for:

- Replacement limit reached at PIA
- Prescription is too high for PIA
- PIA has delayed order
- PIA error, order has been lost

To request an exception, please email [providerservices@iehp.org](mailto:providerservices@iehp.org).

See attached FAQ for more information

The new form can be found on our [website](http://www.ProviderServices.IEHP.org): ProviderServices.IEHP.org > Resources > Resources for Providers > Forms > Vision

If you have any questions, please contact the IEHP Provider Call Center at (909) 890-2054, (866) 223-4347 or email [ProviderServices@iehp.org](mailto:ProviderServices@iehp.org). IEHP communications can be found at: [www.providerservices.iehp.org](http://www.providerservices.iehp.org) > News and Updates > Notices.

IEHP VISION LAB ORDER FORM Inland Empire Health Plan IEHP DualChoice (DSNP) & IEHP COVERED (CCA)									
Member First Name:		Member Last Name:		Member ID#:		Date of Birth:		Gender: Other	
Address:			City:		State:		Zip Code:		Auth #:
Order Date:			Tray #:		Date Received:				
Side	SPHERE	CYLINDER	AXIS	PD		PRISM		BASE	
R				FAR	NEAR				
L									
CHECK APPROPRIATE LENS STYLE									
SINGLE VISION			BIFOCAL		TRIFOCAL		MATERIAL		
<input type="checkbox"/> SINGLE VISION V2100			<input type="checkbox"/> Round 22 V2200-28 <input type="checkbox"/> FLAT 28 V2200-28 <input type="checkbox"/> FLAT 35 V2200-35		<input type="checkbox"/> FLAT 7X28 50% Intermed V2300		<input type="checkbox"/> CR-39		
Side	ADD	SEG HEIGHT		FRAME DETAILS					
R				<input type="checkbox"/> Used Frame <input type="checkbox"/> New Frame <input type="checkbox"/> Frame Enclosed					
L				TINT: *Must include medical justification in special instructions					
		<input type="checkbox"/> UV V2755	<input type="checkbox"/> PNK 1.2 V2740	<input type="checkbox"/> BRN 1.2.3 V2740	<input type="checkbox"/> GRY 1.2.3 V2740	<input type="checkbox"/> V2799-SV	<input type="checkbox"/> V2799-BI		
Frame Manufacturer				Frame Style				Frame Size	
								Eye Size	
								Bridge Size	
								Temple	
								Color	
Add Ons VER REQUIRED *** (Refer to IEHP COVERED CCA evidence of coverage for coverage limits)									
<input type="checkbox"/> VIP X/L Progressives V2781			<input type="checkbox"/> Scratch Resist V2760			<input type="checkbox"/> 1.60 S0581-Sv/S0581-BI			
<input type="checkbox"/> Multi-Layer-Layer Anti-Glare V2750			<input type="checkbox"/> Plastic Photochromic V2744			<input type="checkbox"/> 1.67 S0581-Sv/S0581-BI			
<input type="checkbox"/> Polycarbonate S0580-SV/S0580-BI			<input type="checkbox"/> Other						
*Do not send case, straps, nor specialty attachments with frame(s)									
PROFESSIONAL SIGNATURE:				DATE OF SERVICE:		TELEPHONE:			
Ship To:				Special Instructions: Include medical justification for tint and/or special instructions for lab. *** (Refer to IEHP COVERED CCA evidence of coverage for coverage limits)					



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## Vision Process FAQ

**Q:** Has the process for ordering materials (glasses) changed?

A: No, the process for ordering glasses remains the same. Only the form has been updated for cosmetic and efficiency purposes.

**Q:** For which line of business can the new form be utilized?

A: IEHP DualChoice (HMO D-SNP) and IEHP Covered (CCA).

**Q:** Is the new form fillable?

A: Yes, the form is user-friendly and can be saved to your desktop for quick access or used directly from Our website and printed for lab orders.

**Please utilize the new form** to prevent order delays caused by handwritten forms.

**Q:** Is there a different form for Medi-Cal Members?

A: No, material orders for Medi-Cal Members will continue to be submitted via the PIA website. Medi-Cal contracted Optometry (Vision) Providers have their own login access to the PIA site.

**Q:** What happens if PIA cannot complete an order for materials?

A: Orders for a Medi-Cal Members can only be sent to IEHP's private labs, Express Lens Lab and/or Unique Optical for the following **pre-approved exceptions**:

- Replacement limit reached at PIA
- Prescription is too high for PIA
- PIA has delayed order
- PIA error or order has been lost

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