eyeSynergy® 2.0

User Guide

MARCH®
Vision Care

keeping an eye on your health®

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Section 1: System Requirements

The following guidelines will ensure successful use of eyeSynergy®.

System Requirements

Browser Compatibility
Internet Explorer 9.0 or later* Google Chrome 30 or later* Mozilla Firefox 24.1 or later* Apple Safari 5.1 or later*
Browser Requirements
Disable pop-up blockers Enable Javascript** Disable “Reuse windows for launching shortcuts” in Internet Explorer.
Other Software
Adobe Acrobat Reader 9 or above

*Latest version of browser is recommended.
**Certain feature will not function properly if JavaScript is disabled.

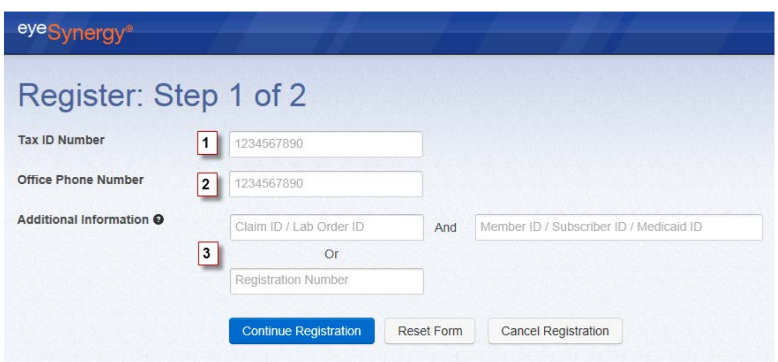
Section 2: Registration

To access the eyeSynergy® Sign In page and begin the registration process, visit providers.eyesynergy.com and select the *Register for a new account or convert an existing account* link. The eyeSynergy® home page is also accessible through the MARCH® Vision Care website at www.marchvisioncare.com, then click on the eyeSynergy® link located on the upper portion of the window.

Register: Step 1

Step 1 in the registration process begins with the user entering provider-specific information into the required fields. The following fields must be completed before moving to Step 2:

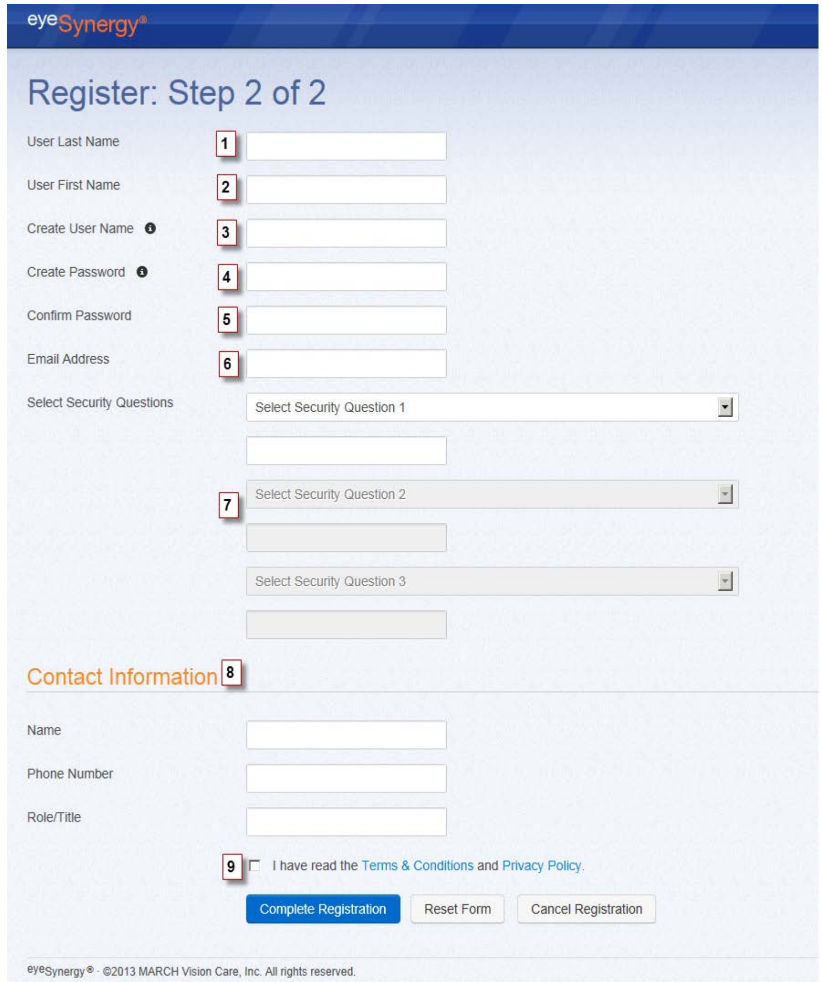
1. Tax ID Number
2. Office Phone Number
3. Additional Information
   a. Claim ID/Lab Order ID and Member ID (from the same member) **OR**
   b. Registration Number (included in Welcome Packet materials or through a MARCH® representative)



After the required information is entered, click the *Continue Registration* button to proceed to Step 2.

Register: Step 2

In Step 2 of the registration process, the user will create a unique UserName and password which will be used to log into eyeSynergy®. The fields that must be completed include:



1. The registering user's Last Name
2. The registering user's First Name
3. Create UserName – A unique name that the user will use to sign-in to eyeSynergy®
   a. UserName must be at least six (6) characters in length;
   b. User Name must not be more than one hundred (100) characters in length;
   c. UserName must satisfy at least one (1) of the following conditions:
      i. Contains uppercase letter (A-Z)
      ii. Contains lowercase letter (a-z)
      iii. Contains number (0-9)
      iv. Contains @ . # $ _ ~
4. Create Password
   a. Password must be at least eight (8) characters in length;
   b. Password must not be more than one hundred (100) characters in length;
   c. Password must satisfy at least three (3) of the following conditions:
      i. Contains uppercase letter (A-Z)
      ii. Contains lowercase letter (a-z)
      iii. Contains number (0-9)
      iv. Contains a valid non-alphanumeric character: ! # % ^ * ( ) @
   d. The user will be prompted to change their password every 60 days. If the user fails to change their password after 60 days, the account will be locked and can only be activated again by contacting MARCH® Vision Care at the appropriate state-specific phone number found on our Contact Us page. To reach eyeSynergy® technical support, please dial extension 7574.
5. Confirm Password
6. Email Address
   a. A valid email address is required for the Administrator* (first user) to register with eyeSynergy®. All correspondence for this account will be sent to this email. This includes a forgotten Password or UserName. Each Account Administrator that is added to this individual or group Provider's account will also need to enter a valid email address.
7. Select three (3) Security Questions / Answers
   a. The user will choose three (3) security questions and give their corresponding answers to these questions. Each answer must be unique; duplicate answers will not be accepted.
8. Contact Information:
   a. Name
   b. Phone Number
   c. Role/Title
9. After reading the *Terms & Conditions* and *Private Policy*, the corresponding box must be checked to finalize registration

After the initial registration, the user will be prompted to change their password every 60 days. If the user fails to change their password after 60 days, the account will be locked. This account can only be activated again by contacting MARCH® Vision Care at the appropriate state-specific phone number found on our Contact Us page. To reach eyeSynergy® technical support, please dial extension 7574.

**Note: The first user to create an eyeSynergy® account for an individual or group assumes the role of Administrator. The Administrator has full access to all of the eyeSynergy® functionalities including the ability to generate confirmations, submit claims, and order materials. The Administrator may also choose to add or delete users to the provider's account, as well as change the access settings for the other account users in the office.*

Section 3: Navigation

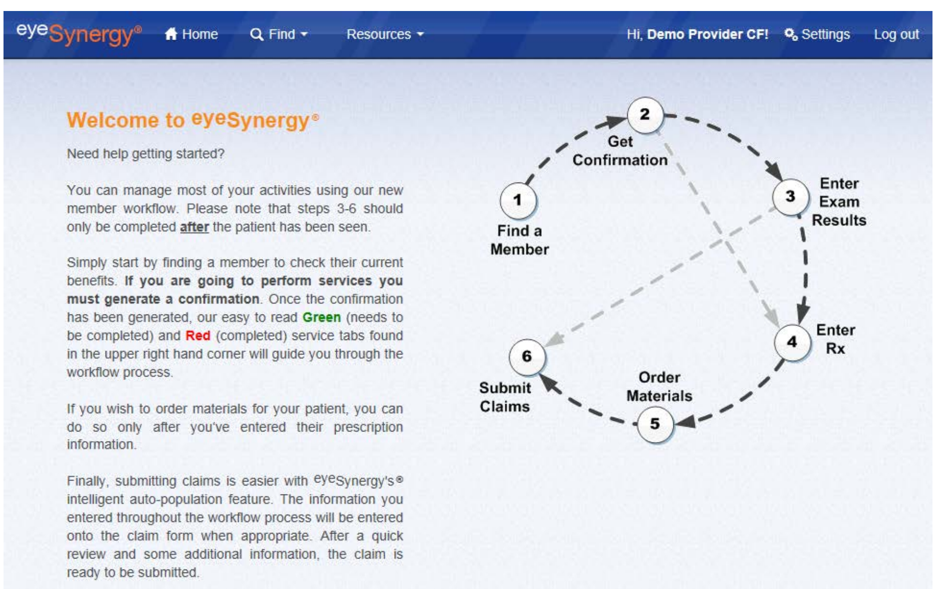
Menu Bar Navigation

To navigate through eyeSynergy®, use the Menu Bar located at the top of the window. The Menu Bar will allow users to access the different areas of eyeSynergy® at any time during the session.

Home

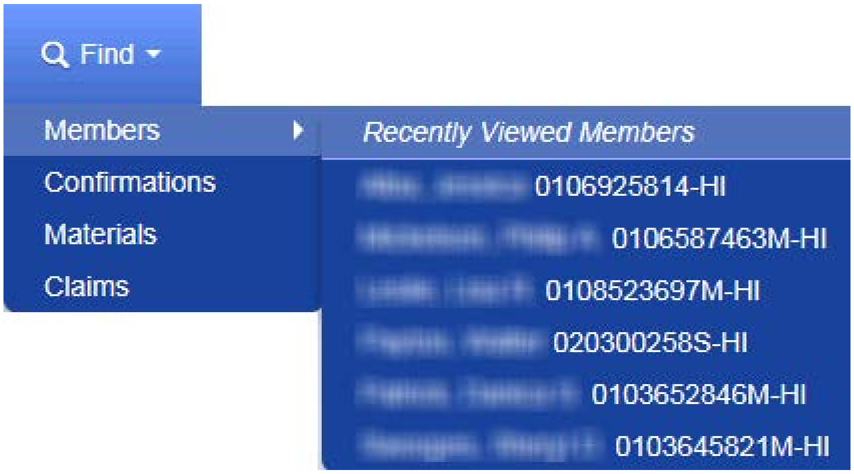
The *Home* button will take users back to the Welcome Page. Located on the right side of the welcome page, a process workflow gives providers an overview of the eyeSynergy® process. The provider process workflow demonstrates the most efficient way for providers to navigate through eyeSynergy®. The steps include:

1. Find a Member
2. Get Confirmation
3. Enter Exam Results
4. Enter Rx
5. Order Materials
6. Submit Claims



The provider process workflow can always be referred to throughout the eyeSynergy® session, if the user is unsure of what needs to be completed next.

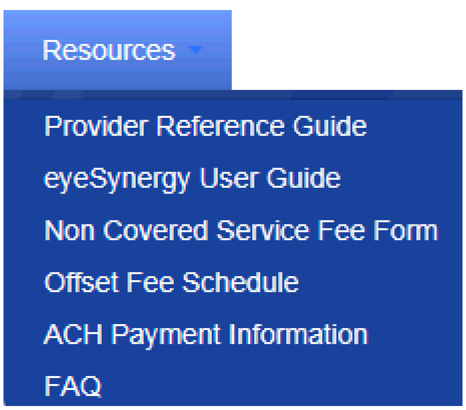
Find



The *Find* button is used to search for various items, including:

1. Find a Member
2. Find a Confirmation
3. Find a Material Order
4. Find a Claim
5. List of the last 10 recently viewed members

Resources



The *Resources* button gives users access to informational materials, including:

1. Provider Reference Guide
2. eyeSynergy® User Guide
3. Non Covered Service Fee Form
4. Offset Fee Schedules
5. ACH Payment Information
6. Frequently Asked Questions ("FAQ")

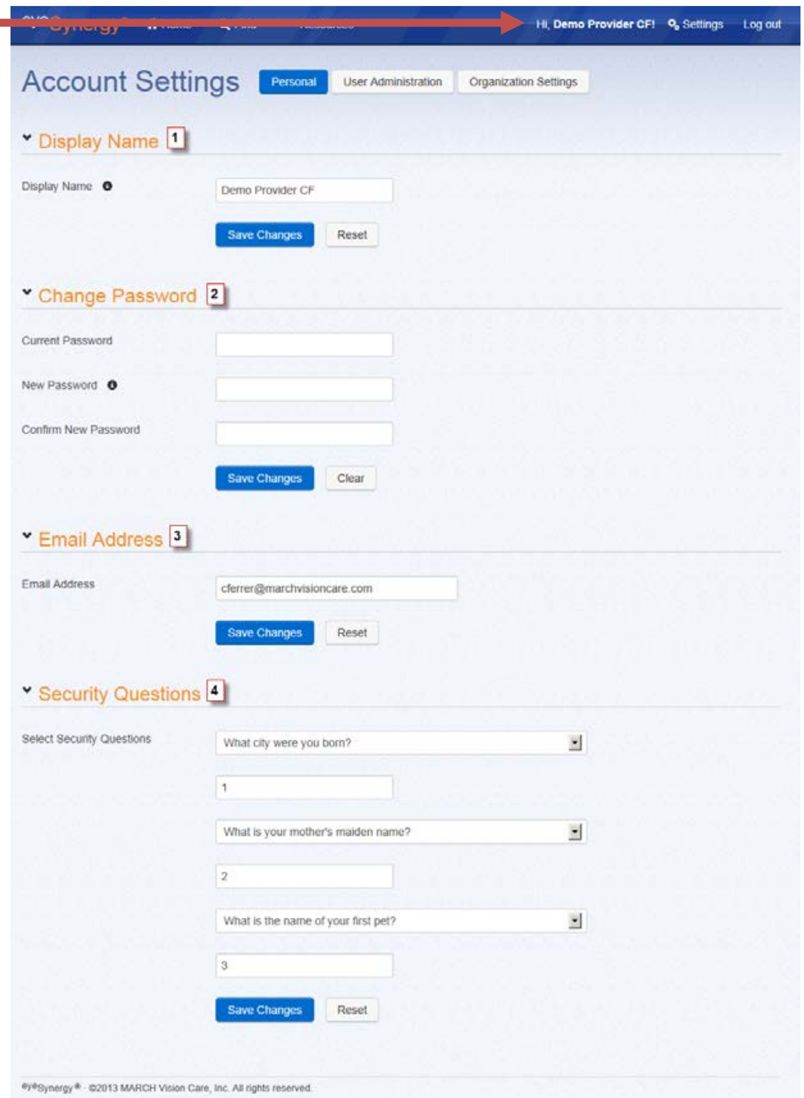
Settings

The *Settings* button allows users to manage their personal accounts, as well as additional account user roles. The three (3) setting types include Personal, User Administration, and Organization Settings.

Personal

Within the Personal Account Settings area, users are able to change the following items:

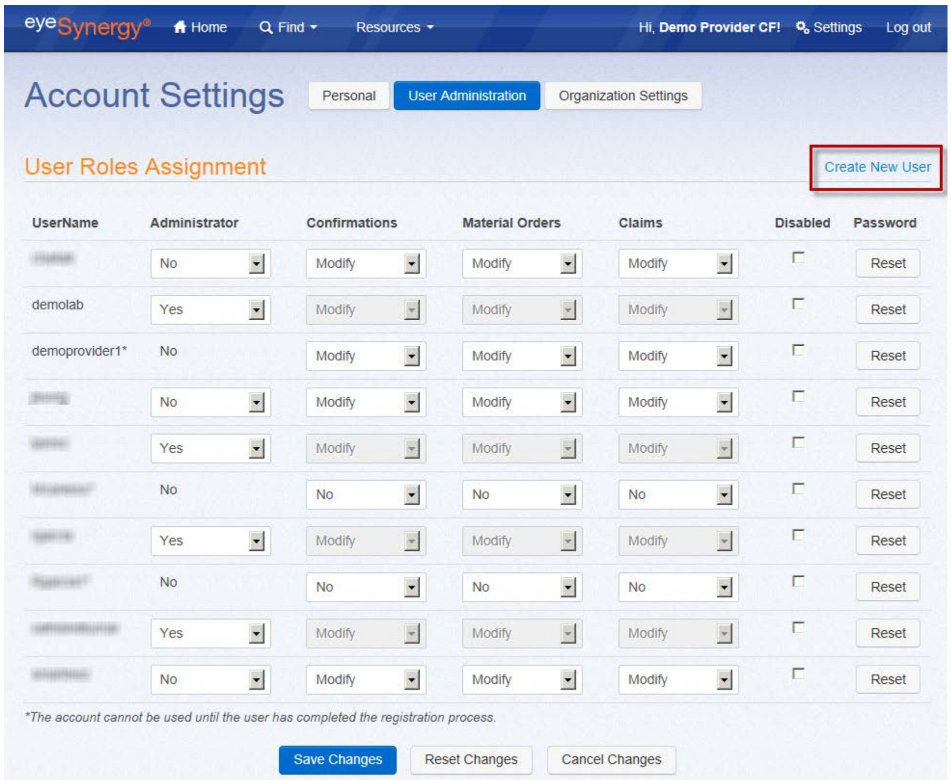
1. Display Name
   a. The Display Name does not have to be the same name used to sign-in to eyeSynergy®. This name can be changed as often as the user wants to.
2. Password
3. Email address
4. Security questions and/or answers.



User Administration

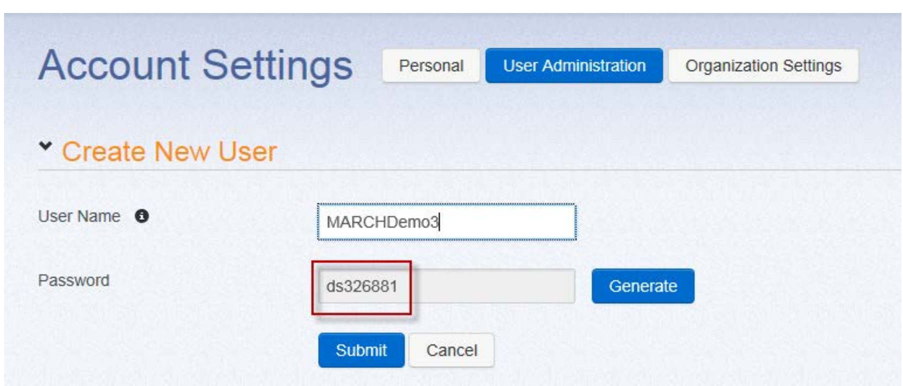
Within the User Administration area, the Account Administrator is able to add and remove additional user and assign permissions/roles to these additional users. This feature will only be available to the Account Administrator(s).

Note: The default Administrator is the person who first created an account for the group or Tax ID. Please ensure the person registering for this account understands their role as Administrator. Once the default Administrator finalizes registration, they will have the ability to assign additional users as Administrators.



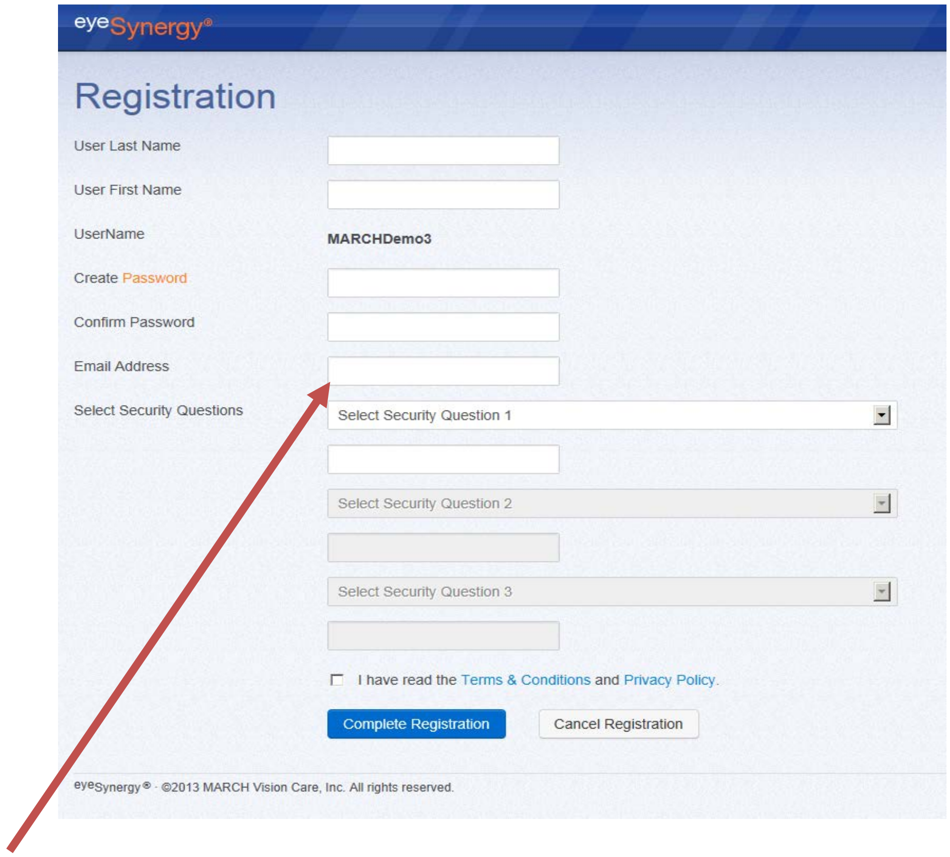
Create New User

To create a new user, select the *Create New User* link (on the right side of the window). Enter the desired new UserName in the corresponding field and then submit the request.



A temporary password will be created for this new user. The Administrator will need to save this password since it is needed for the new user to register and sign-in to their unique account.

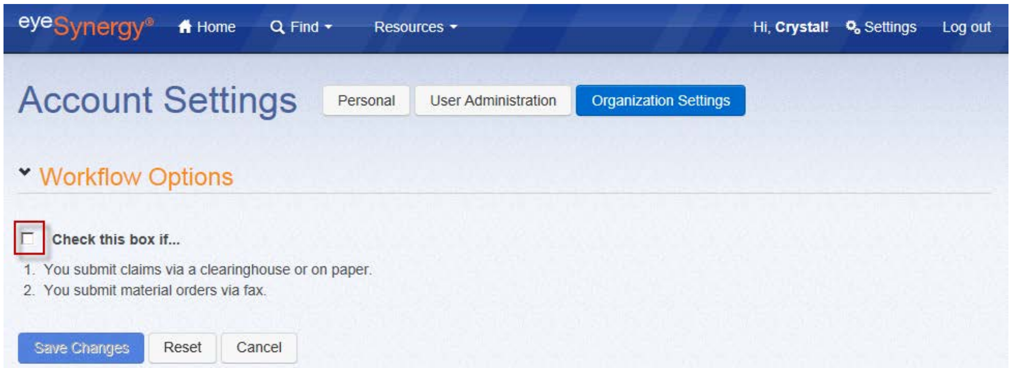
When the new user is ready to create their account, enter their UserName and temporary password on the main eyeSynergy® Sign In page. The new user will be prompted to complete their Registration and will then able to create their own password and answer their own personal security questions.



Note: For a user to become an account administrator, a valid email address must be provided.

Organization Settings

Important: If a provider's claims are either submitted via a clearinghouse or on paper and/or material orders are submitted via fax, not through eyeSynergy®, check the box next to the statement, "*Check this box if...*" Selecting this option alerts the system that the typical workflow process does not need to be completed. Most providers will use this option to search for a member and generate a confirmation. The system will allow the user to complete the workflow, but it is not required.



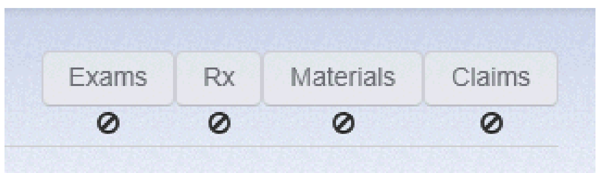
Note: This feature will only be available to the Account Administrator(s).

Member-Centric Navigation Buttons

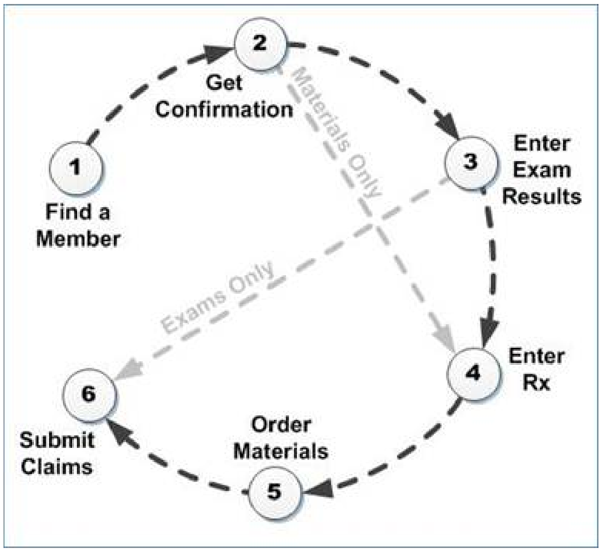
The member-centric navigation buttons are specific to the member that has their confirmation number displayed on the upper right portion of the screen. These buttons become visible while generating a confirmation number and remain visible as long as the confirmation is active.

During the generation of a Confirmation number, the upper right portion of the screen will display the following four (4) buttons:

1. Exams
2. Rx
3. Materials
4. Claims



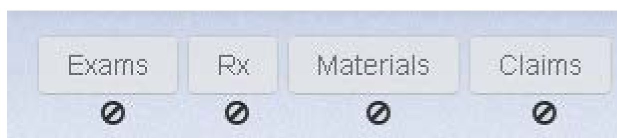
These buttons follow the scenarios possible in the provider workflow process based on the services rendered (All Services, Exam Only, Materials Only).



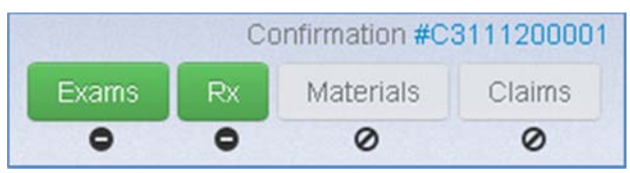
Depending on what services the confirmation number is generated for, the buttons will allow you to follow the provider process in the correct order. After all of the necessary information is submitted under each section, the button will turn **red** (meaning complete) and a check mark will appear underneath.

Completing a section will allow following sections (i.e. Rx, Materials, Claims) to become accessible. When a section can be accessed, the button will turn **green** (needs to be completed) and a symbol will appear below the button. When a button is **red**, this means the section has already been completed. A grayed out button will appear if the section is not available to the user, based on what services were chosen during the confirmation generation process. For example, the following scenario for **"All Services"** shows what the buttons will look like after each step is completed:

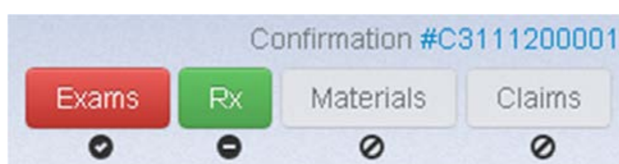
1. Before generating a confirmation



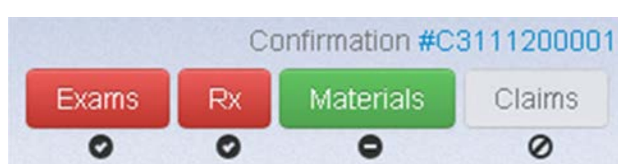
2. After generating a confirmation for All Services
    a. The Exams and Rx buttons are available to input member Exams and Rx information (in any order)



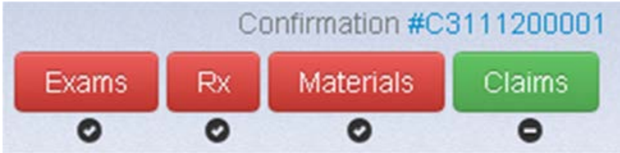
3. After submitting Exams information, the button will turn red (indicating this step is complete) and the Rx information is ready to be submitted.



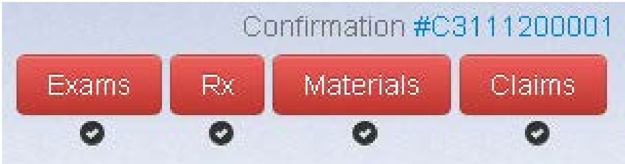
4. Once the Exams and Rx sections are completed, the Materials order is ready to be entered.



5. After the Materials section has been completed and the lab order submitted, a Claim can be submitted by clicking the Claims button.



6. After each step is completed, all buttons will be red, letting the user know this confirmation can be closed.



Section 4: Member Search and Benefit Details

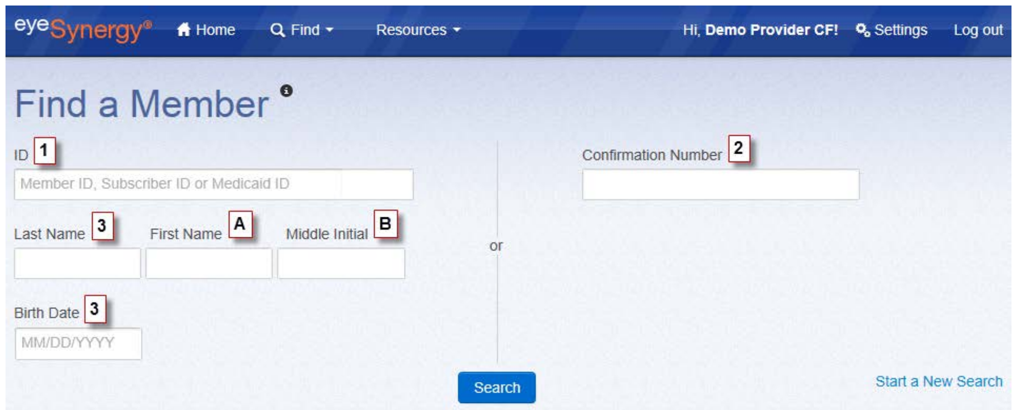
Find a Member

To find a member using eyeSynergy®, select the *Find* button on the Menu Bar, and then select *Members*. A minimum of one (1) of the following search parameters is required to begin the search:

1. Member ID, Subscriber ID, or Medicaid ID
2. Confirmation Number
3. Last Name (at least with first 2 characters), along with Member's Birth Date

Optional search parameters include:

A. First Name
B. Middle Initial



The results will list all members that fit the search criteria. If the list of members is lengthy, select the *Refine Search* button and enter additional search criteria to get more specific results.

Member Benefit Summary

The Member Benefit Summary allows the user to view member-specific information and benefits available or exhausted. To view a member's benefit summary, select the member from the *Find a Member* search results OR the user can click the *Benefits* button next to the member's name. In addition to the member's personal information, the Member Benefit Summary page also shows:

1. Health Plan/Benefit Plan details (including links to general information about these plans)
2. Available Services
3. Benefit Level
4. Benefit Status
5. Exhausted/Restricted Services

A confirmation number can also be generated in the Member Benefit Summary page, which will be discussed in further detail in the *Confirmation* section of this manual.

eyeSynergy® Home Find Resources Hi, Demo Provider CF! Settings Log out

, SHERYL D Benefits Generate Confirmation

Member Benefit Summary Print Friendly Version

Name:	, SHERYL	1	Health Plan:	ABC Healthcare of Hawaii Medicaid
Member ID:	0103645821M		Benefit Plan:	ABC HAWAII MEDICAID - PLAN A
Address:	1000 ELYSIAN PARK AVENUE KAMUELA, HI 96743		Plan Type:	MEDICAID
			Plan State:	HI
Phone:	(808) 874-5700		Effective Date:	08/01/2009
Birth Date:	11/22/1990		Termination Date:	currently active
SSN:	XXX-XX-3454			

Summary of benefits as of 1/3/2014 12:36:09 PM.
Benefit status includes adjudicated claims and in-process material orders as of 1/3/2014 12:36:09 PM. Benefit status may change as additional member claims are adjudicated or additional material orders are placed.

Available Services 2	Benefit Level 3	Benefit Status 4
Routine Exam for Diabetic Members	1 service date every year	Available
Deluxe Frame [1]	1 unit every 2 years	Available
Glasses Fitting	1 service date every 2 years	Available
Routine Exam	1 service date every 2 years	Available
Frame * [1]	1 unit every 2 years	Available
Lens * [2]	2 units every 2 years	Available
Deluxe Frame Replacement Due to Damage/Loss Ages 21 and Older *	1 unit every year	Available
Deluxe Frame Replacement Due to Vision Change *	fully covered	Available
Glasses Fitting Replacement Due to Damage/Loss Ages 21 and Older *	1 service date every year	Available
Glasses Fitting Replacement Due to Vision Change *	fully covered	Available
Routine Exam Replacement Due to Damage/Loss Ages 21and Older *	1 unit every year	Available
Routine Exam Due to Vision Change *	fully covered	Available
Frame Due to Vision Change *	fully covered	Available
Lens Replacement Due to Damage/Loss Ages 21 and Older *	2 units every year	Available
Lens Replacement Due to Vision Change *	fully covered	Available
Lens - Prism, Occluder or Balance Replacement Due to Damage/Loss Age 21 and Older *	2 units every year	Available
Lens - Prism, Occluder or Balance Replacement Due to Damage/Loss Age 20 and Under *	4 units every year	Available
Necessary Deluxe Frame Instead of Multifocals * [2]	2 units every 2 years	Available
Necessary Frame Instead of Multifocals * [2]	2 units every 2 years	Available
Necessary Lens Instead of Multifocals * [2]	4 units every 2 years	Available
Necessary Prism,Occluder or Balance Lenses Instead of Multifocal * [2]	4 units every 2 years	Available
Necessary Contacts * [2]	2 units every 2 years	Available
Necessary Contacts Exam *	1 service date every 2 years	Available
Necessary Color Tinting or Photochromatic *	fully covered	Available
Necessary Medical Services	fully covered	Available
Lens - Prism, Occluder or Balance *	2 units every 2 years	Available

Exhausted/Restricted Services 5	Benefit Level	Benefit Status
All of the member's benefits are available.		

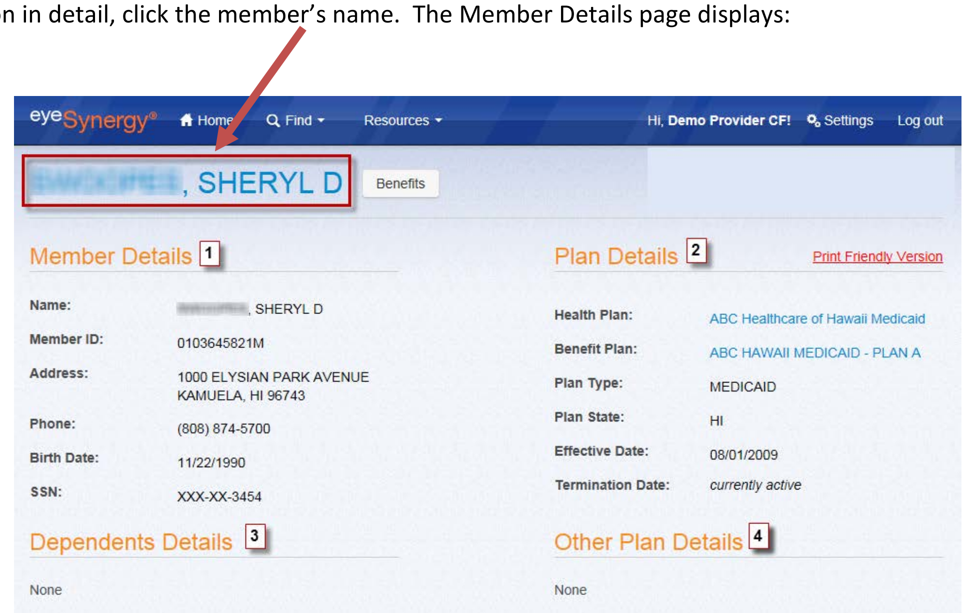
* Please refer to the State Specific Benefits for information on services marked with an asterisk.

[1] Certain discounts may not be available at all locations. Please contact member customer service at (888) 493-4070 for additional information.

[2] Member may be eligible for service if specific criterion is met. Please reference the Provider Reference Guide (PRG) for additional information. A current version of the PRG is always available on our website at www.marchvisioncare.com. You may request a current copy of the PRG on CD, by calling our Provider Relations Department Monday through Friday, 8:00 am to 5:00 pm local time at (888) 493-4070. When calling, select option 3 and then Network Development.

Member Details

To view member-specific information in detail, click the member's name. The Member Details page displays:



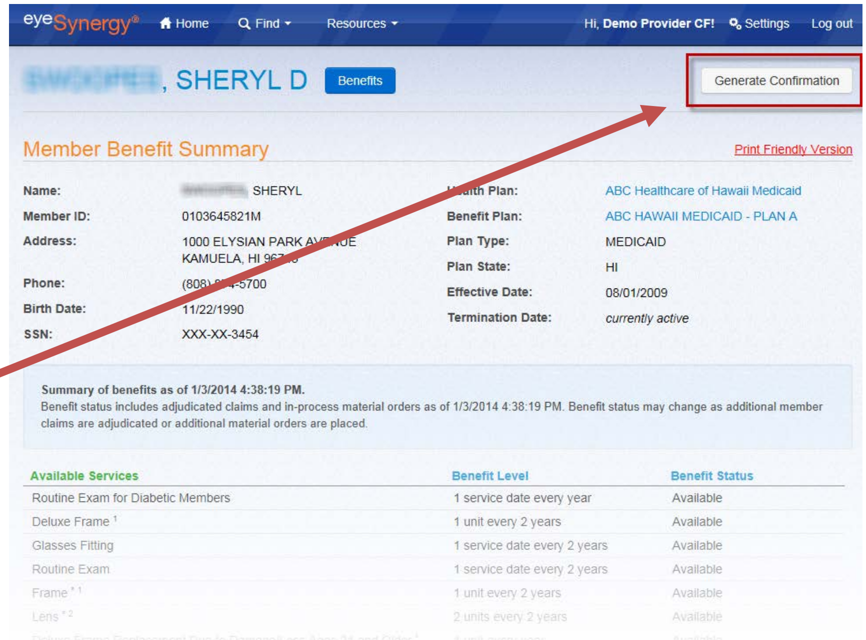
1. Member Details
2. Plan Details (with links to general plan information)
   a. The plan listed here will be the plan that the "Available Services" list is taken from.
3. Dependents Details
   a. All of the member's dependents will be listed here.
4. Other Plan Details
   a. If the member is apart of another Health or Benefit plan, the information will be displayed here.

Section 5: Confirmations

A confirmation number affirms member eligibility for requested benefits and services, and can be generated through eyeSynergy®. The confirmation number is valid from the proposed date of service, until the end of that month.

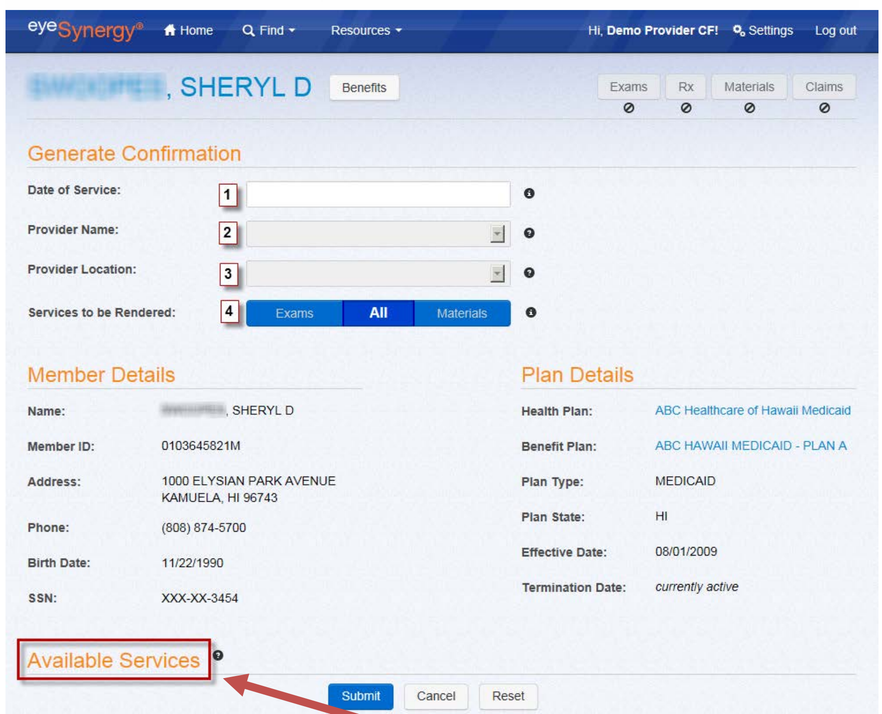
Generate a Confirmation

To generate a confirmation number for a member through eyeSynergy®, the first step is to search for the desired member. To locate a member, please follow the steps in the *Find a Member* section of this manual. When the member is located, access their Member Benefits Summary by clicking the *Benefits* button. On the Member Benefits Summary page, a confirmation can be generated by clicking the *Generate Confirmation* button on the upper right side of the window.



To complete the confirmation generation process, the required fields must be completed. These fields include:

1. Date of scheduled service
   a. Date of Service must be between Member Eligibility Dates
2. Provider Name
   a. Must select valid Date of Service to see the drop down list of providers
3. Provider Location
   a. Must select valid provider to see the drop down list of service locations
4. Services to be Rendered
   a. Exams only
   b. Materials only
   c. All services



After a valid date of service is entered, all of the member's available services will be listed below the *Available Services* area.

Confirmation Details

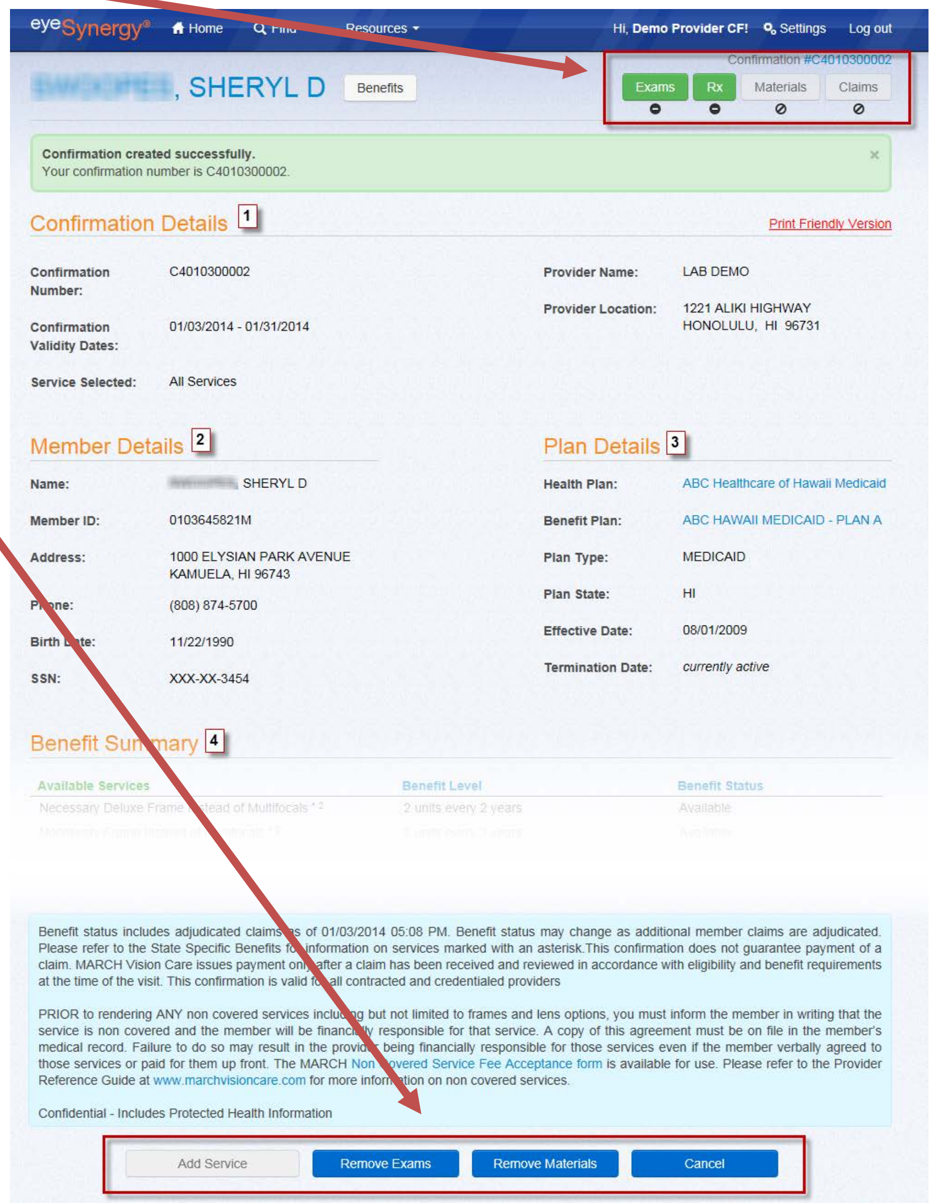
After the information is submitted for a confirmation, a Confirmation Details page appears, displaying the confirmation number in the upper right corner, along with the member-centric navigation buttons. This page also displays the following information:

1. Confirmation Details
    a. Confirmation Number
    b. Confirmation Number Validity Dates
    c. Service Selected
    d. Provider Name
    e. Provider Location
2. Member Details
3. Plan Details
4. Benefit Summary

At the bottom of the page, there is also an option to:

1. Add Service
    a. If Exam only or Materials only was selected for "Service Rendered", the user can add additional services to make it "All Services"
2. Remove Service
    a. If All services were selected for "Service Rendered", the user can remove exams or remove materials
3. Cancel the confirmation

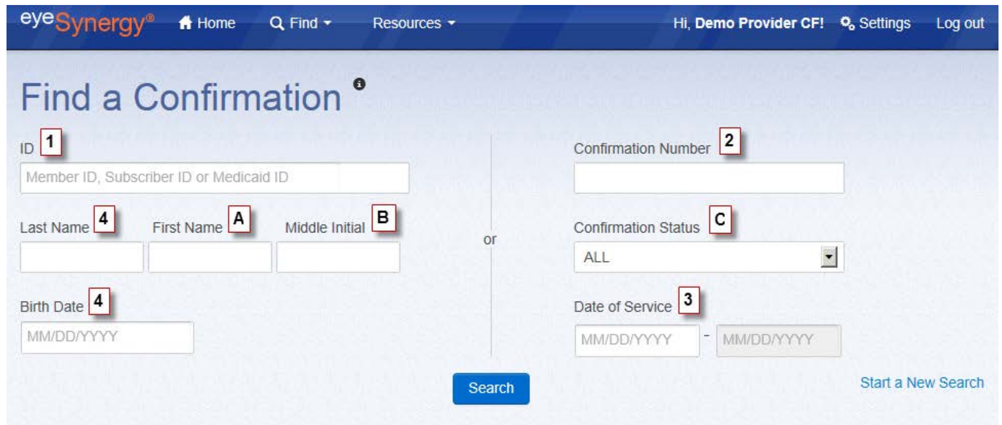
Note: Clicking on the Confirmation number in the upper right corner (from any page) will always take the user back to this *Confirmation Details* page.



Find a Confirmation

To find a previously generated Confirmation number for a member and access their Confirmation Details page, select the *Find* button on the Menu Bar, then select *Confirmations*. A search for the member's Confirmation Details Page can be performed by entering a minimum of one (1) of the following search parameters:

1. Member ID, Subscriber ID, or Medicaid ID
2. Confirmation Number
3. Confirmation Date of Service (both Start & End Dates)
4. Last Name (at least with first two (2) characters) along with Member's Birth Date

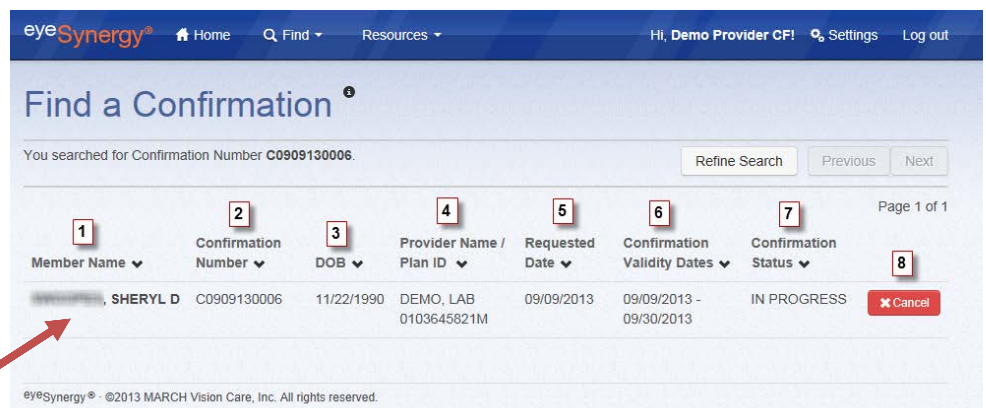


Optional search parameters include:

A. First Name
B. Middle Initial
C. Confirmation Status

The search results will list the member's Confirmation information, including:

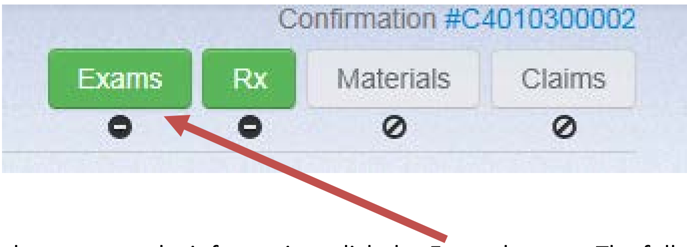
1. Member Name
2. Confirmation Number
3. DOB
4. Provider Name/Plan ID
5. Requested Date of Service
6. Confirmation Validity Dates Date
7. Confirmation Status
8. Option to cancel Confirmation



Click on the member/Confirmation desired to display the Confirmation Details page. If the list of members is lengthy, select the *Refine Search* button and enter additional search criteria to get more specific results.

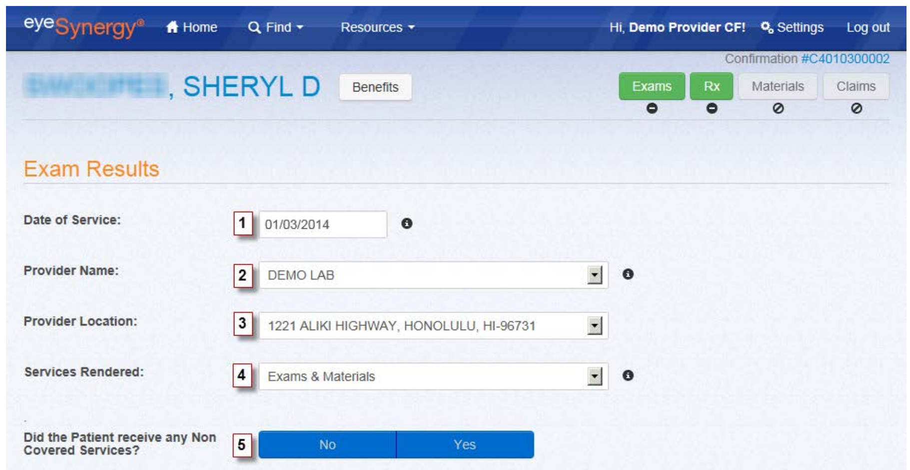
Section 6: Exam Results

Once the Confirmation number is created, the *Exams* button will become active (as indicated by green color and the symbol):



To enter the exam results information, click the *Exams* button. The following areas must be completed:

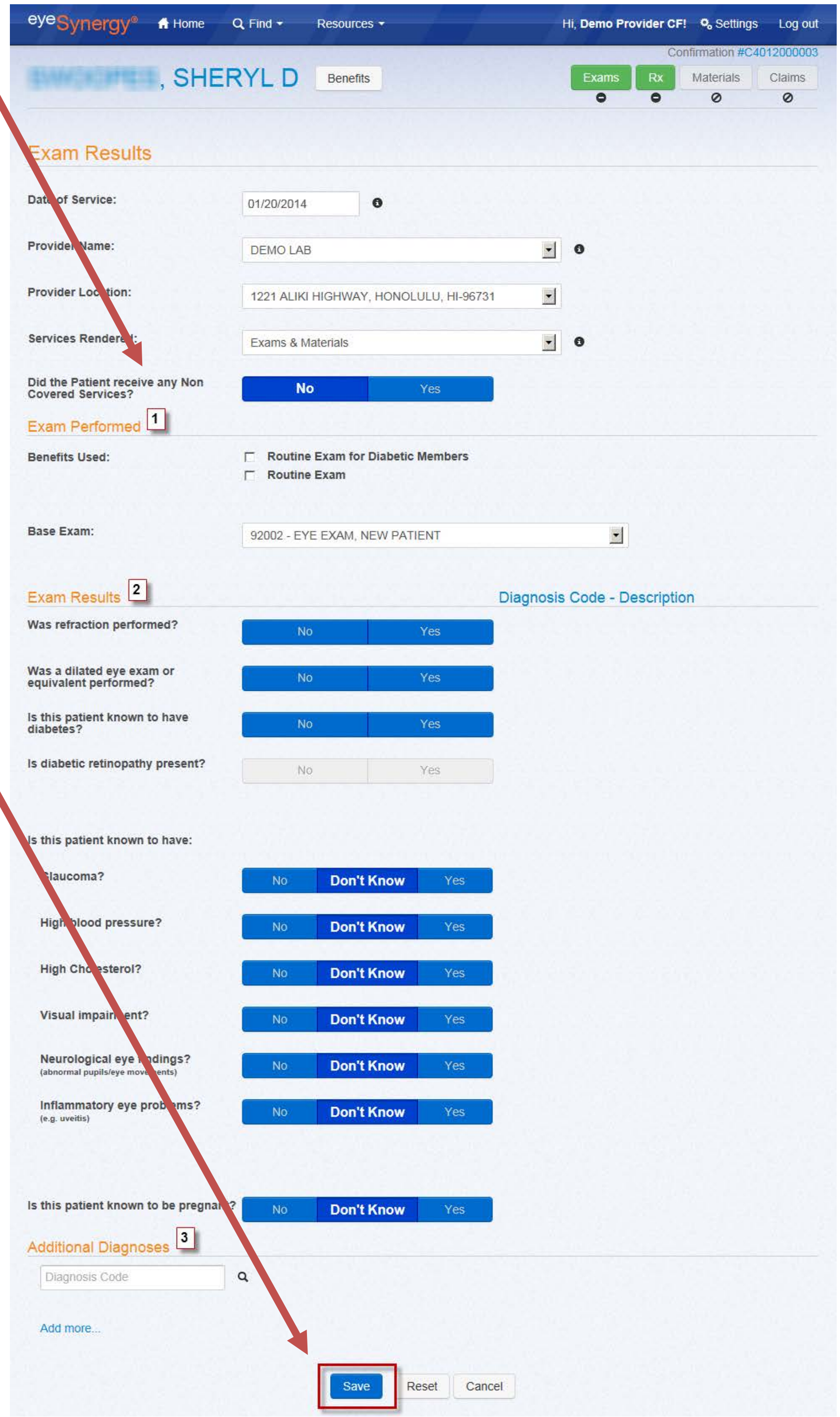
1. Date of Service
   a. Must be between Confirmation Validity Date and the last day of that month
2. Provider Name (drop down menu)
3. Provider Location (drop down menu)
4. Services Rendered (drop down menu)
   a. Based on what was chosen for *Services to be Rendered* when the confirmation was generated
5. Did the Patient receive any Non Covered Services?
   a. Click the appropriate Yes or No answer



After the question "*Did the Patient receive any Non Covered Services*," is answered, additional information will need to be entered for:

1. Exam Performed
    a. Benefits Used (check the option that applies)
    b. Base Exam (select from drop down menu)
2. Exam Results
    a. For each question, select: No, Don't Know, or Yes
3. Additional Diagnoses (if applicable)
    a. To search for a diagnosis code, click the symbol and type the diagnosis.

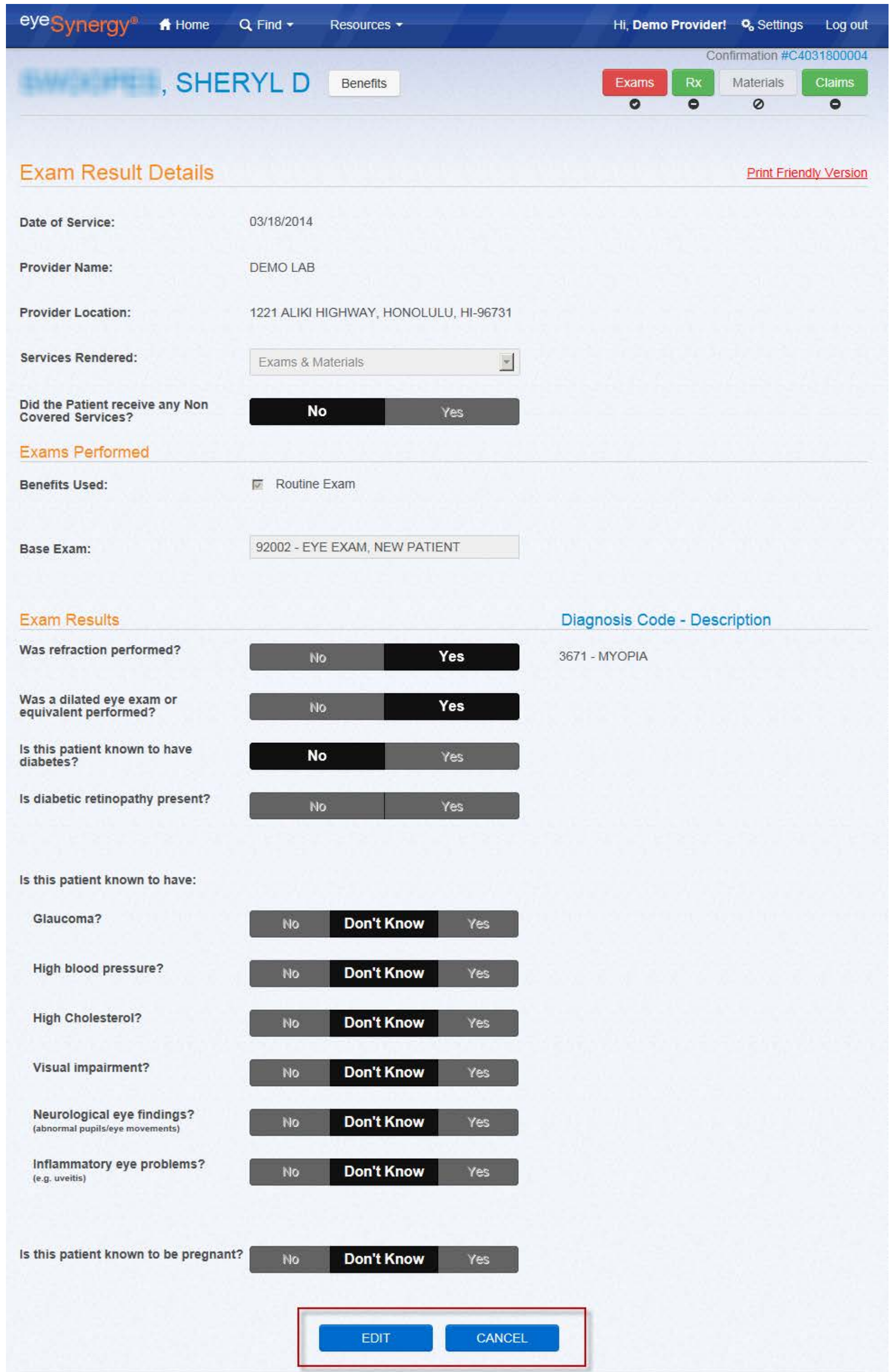
Once all information is entered, click *Save* to continue onto the next step.



Exam Result Details

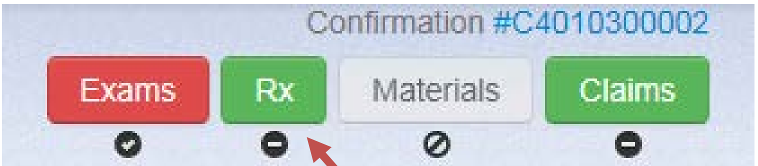
After the *Exam Results* page is saved successfully, the system will automatically route the user to the *Exam Result Details* page. The user can also access this page at any time by clicking the **red** *Exams* button.

The *Exam Result Details* page will summarize the choices the user selects in the previous *Exam Results* section. At the bottom of this page, the user is given the option to either edit or cancel the *Exam Results*. The user may Edit or Cancel this *Exam Results* page until a claim is submitted with this confirmation number. Once a claim is submitted, the Edit and Cancel buttons will become inactive.



Section 7: Rx

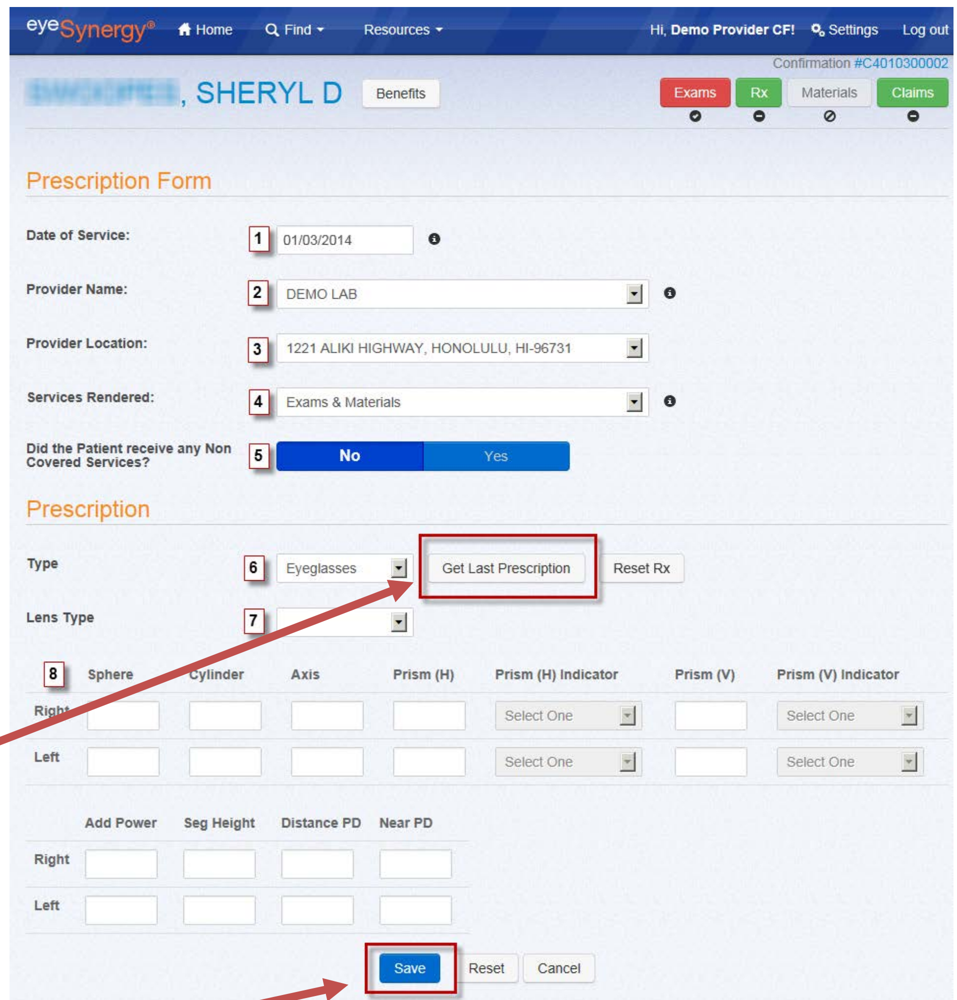
Prescription information is can be entered when the *Rx* button is activated (as indicated by green color and the symbol):



To enter prescription information, click the *Rx* button. Any information provided in the *Exams* section of eyeSynergy® will be carried over into the *Rx* section.

The following areas must be completed:

1. Date of Service
   a. Must be between Confirmation Validity Date and the last day of that month
2. Provider Name (drop down menu)
3. Provider Location (drop down menu)
4. Services Rendered (drop down menu)
   a. Based on what was chosen for *Services to be Rendered* when the confirmation was generated
5. Did the Patient receive any Non Covered Services?
   a. Click the appropriate Yes or No answer
6. Prescription Type (drop down menu)
7. Lens Type (drop down menu)
8. Prescription Detail



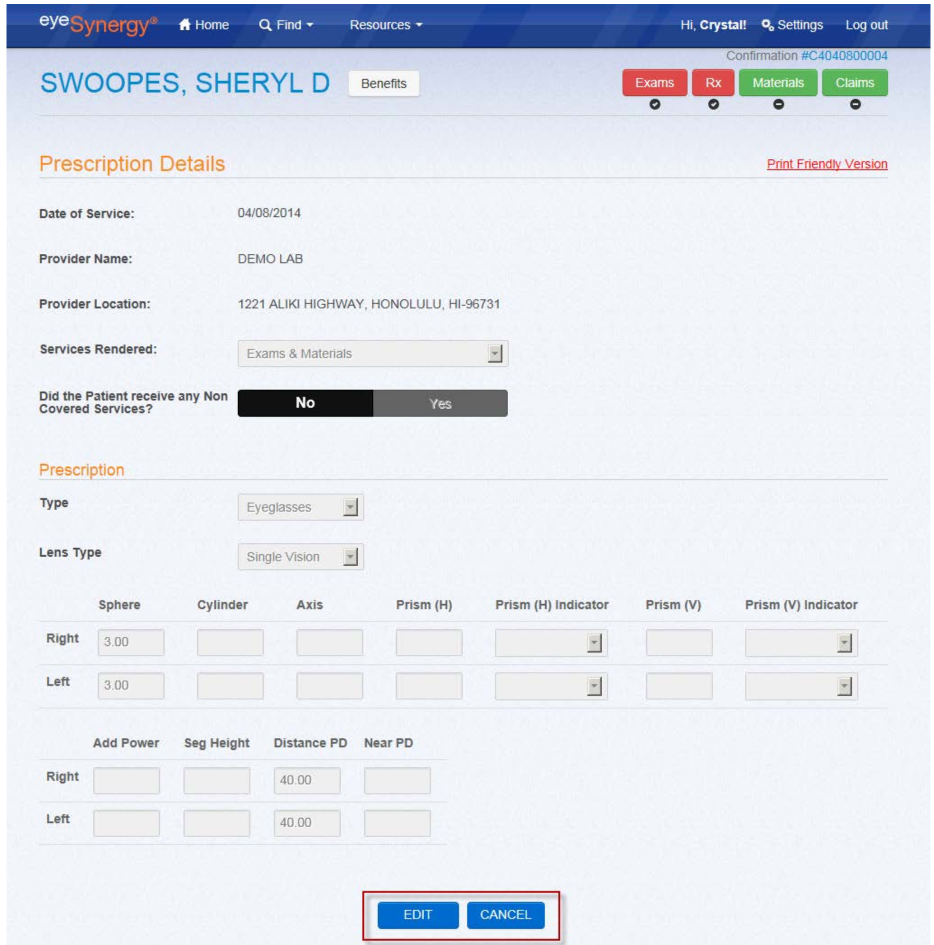
There is also an option to *Get Last Prescription.* This will let the user get the member's last prescriptions for the last 3 years (if this member has stored information from a previous prescription). This will auto-populate the prescription information based on the member's last prescription.

Once all information is entered, click the *Save* button at the bottom to continue onto the next step.

Prescription Details

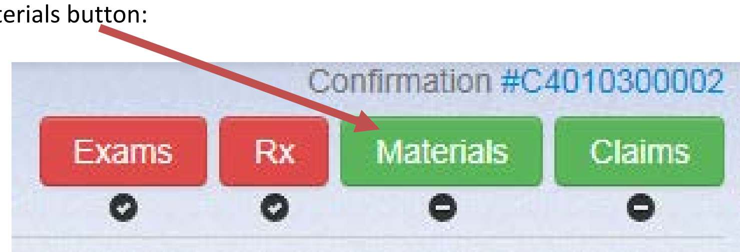
After the *Prescription Details* page is saved successfully, the system will automatically route the user to the *Prescription Details* page. The user can also access this page at any time by clicking the **red** *Rx* button.

The *Prescription Details* page will summarize the choices the user selects in the previous *Prescription Details* section. At the bottom of this page, the user is given the option to either edit or cancel the *Prescription Details*. The user may Edit or Cancel this page until a material order is submitted. Once a material order is submitted, the Edit and Save buttons will become inactive.



Section 8: Materials

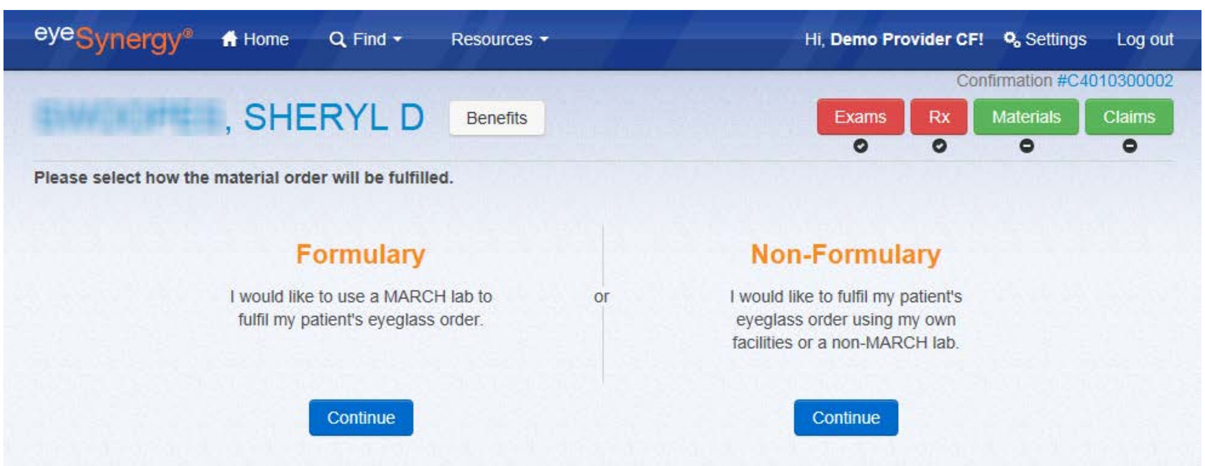
The Materials section of eyeSynergy® is accessible after successfully completing the Rx section. If materials need to be ordered (based on what was selected for *Services to be Rendered*), the *Materials* button will become active. To begin ordering Materials, click on the Materials button:



Material Order Forms

There are four (4) different types of Material Order Forms. Each form is based on if the provider is using a MARCH® lab to fulfill the member's material order and the type of materials ordered. After the prescription information has been saved in the Rx section, the user will either be automatically directed to a specific form based on the terms of their contract with MARCH®, or in some cases the user will be prompted to select how the material order will be fulfilled:

- Formulary
  - MARCH® lab will be used to fulfill the patient's material order
- Non-Formulary
  - Non-MARCH® lab will be used to fulfill the patient's material order

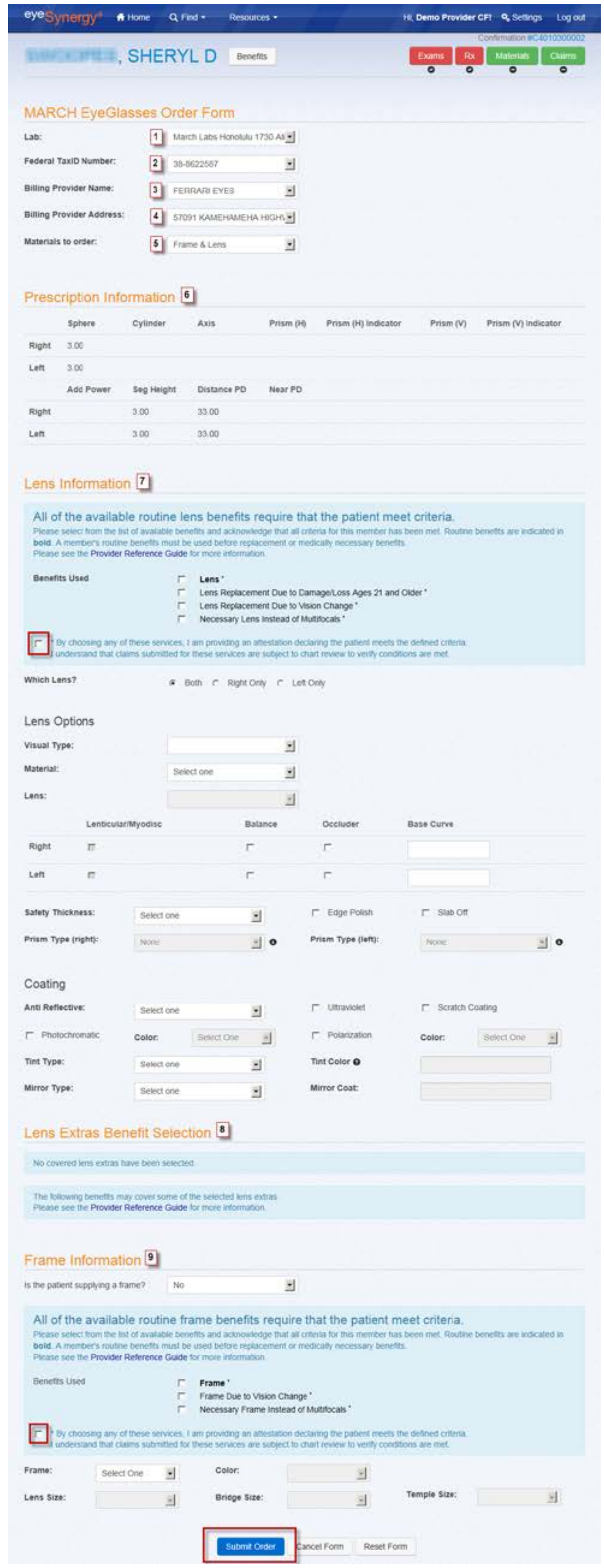


Formulary Order Forms

MARCH® Eyeglasses Order Form (not available in every state)

The MARCH® Eyeglasses Order Form is used when the provider uses a MARCH® lab to fulfill an eyeglasses order. The following information must be completed before submitting the order:

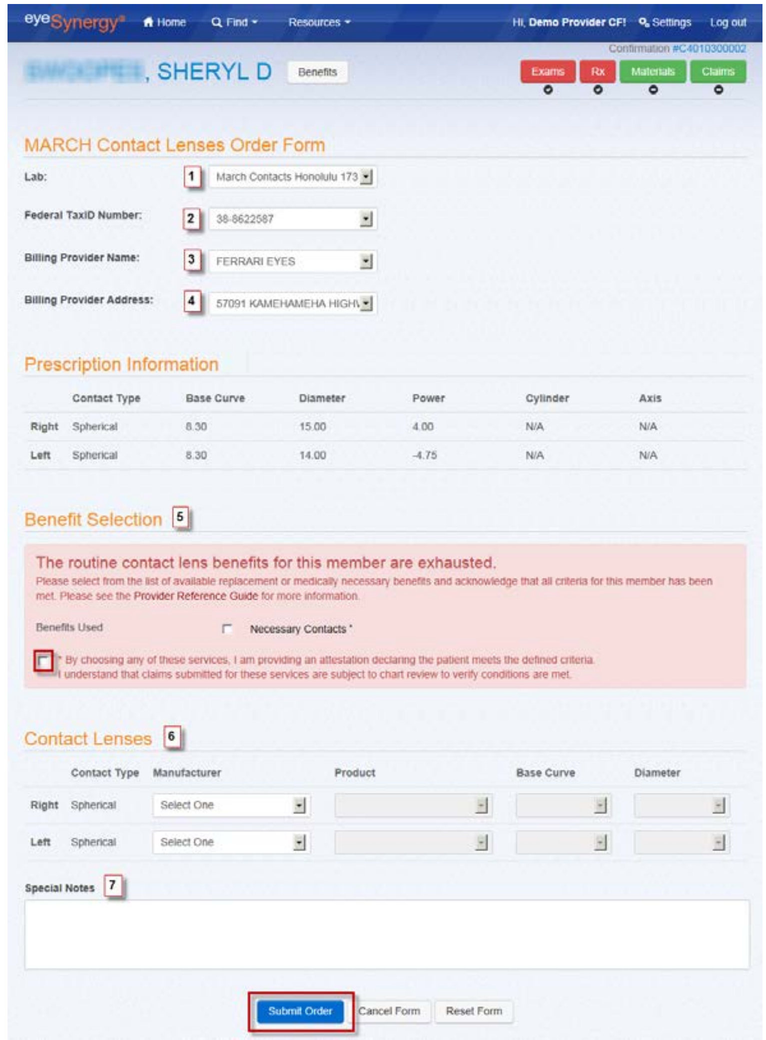
1. Lab
2. Federal Tax ID Number
3. Billing Provider Name
4. Billing Provider Address
5. Materials to order
    a. Frame & Lens
    b. Frame Only
    c. Edge Lens Only
    d. Uncut Lens Only
6. Prescription Information
    a. Summary of the prescription information that was previously entered in the Rx section
7. Lens Information
    a. Attestation that the member has met the criteria for the selected benefits (if applicable)
    b. Lens Options
        i. Visual Type
        ii. Material
        iii. Lens
        iv. Safety Thickness
        v. Prism Type (if applicable)
    c. Coating
        i. Anti Reflective
        ii. Tint Type
        iii. Mirror Type
8. Lens Extras Benefit Selection
    a. List of lens extras selected
    b. List of lens extras benefits available
9. Frame Information
    a. Patient Supplied Frame
        i. Yes - Patient-Supplied Frame Information
            - Option to print letter
        ii. No Benefits Used
    b. Select the appropriate Benefits Used
        i. Attestation that the member has met the criteria for the selected benefits Frame
        ii. Select frame
        iii. Color
        iv. Lens Size
        v. Bridge Size
        vi. Temple Size



MARCH® Contact Lens Order Form (not available in every state)

The MARCH® Contact Lens Order Form is used when the provider uses a MARCH® lab to fulfill a contact lens order. The order form will auto-populate the prescription information from the Rx portion of eyeSynergy®. The following information also needs to be completed before the order can be submitted successfully:

1. Lab
2. Federal TaxID Number
3. Billing Provider Name
4. Billing Provider Address
5. Benefit Selection
    a. Benefits Used (check applicable box)
    b. Attestation that the member has met the criteria for the selected benefits
6. Contact Lenses
    a. Manufacturer
    b. Product
    c. Base Curve
    d. Diameter
7. Special Notes (if applicable)

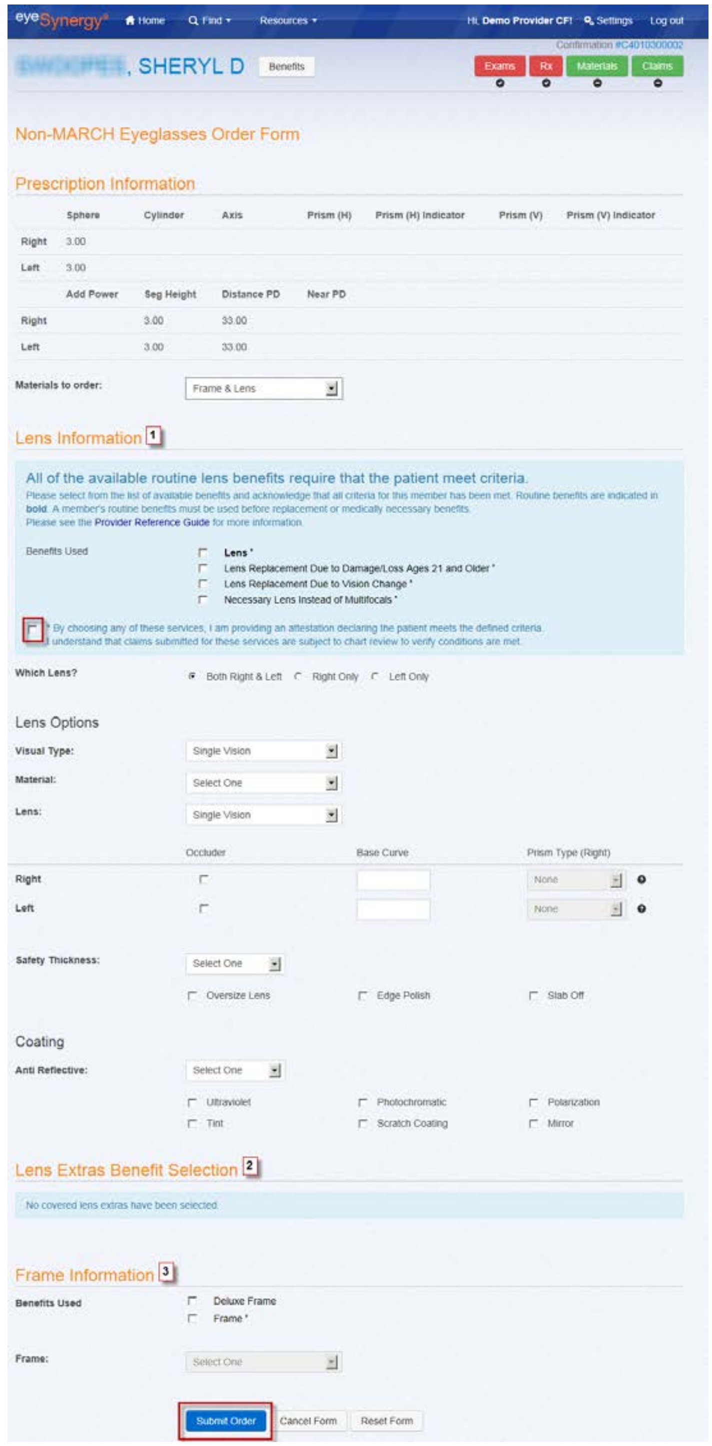


Non-Formulary Order Forms

Non-MARCH® Eyeglasses Order Form (not available in every state)

The MARCH® Eyeglasses Order Form is used when the provider is **not** required to use a MARCH® lab and chooses to fulfill their patient's eyeglasses order using their own facilities or a non-MARCH® lab. The order form will auto-populate the prescription information based on what was entered in the Rx section, including the *Materials to order* selection. The following information must also be completed before submitting the order:

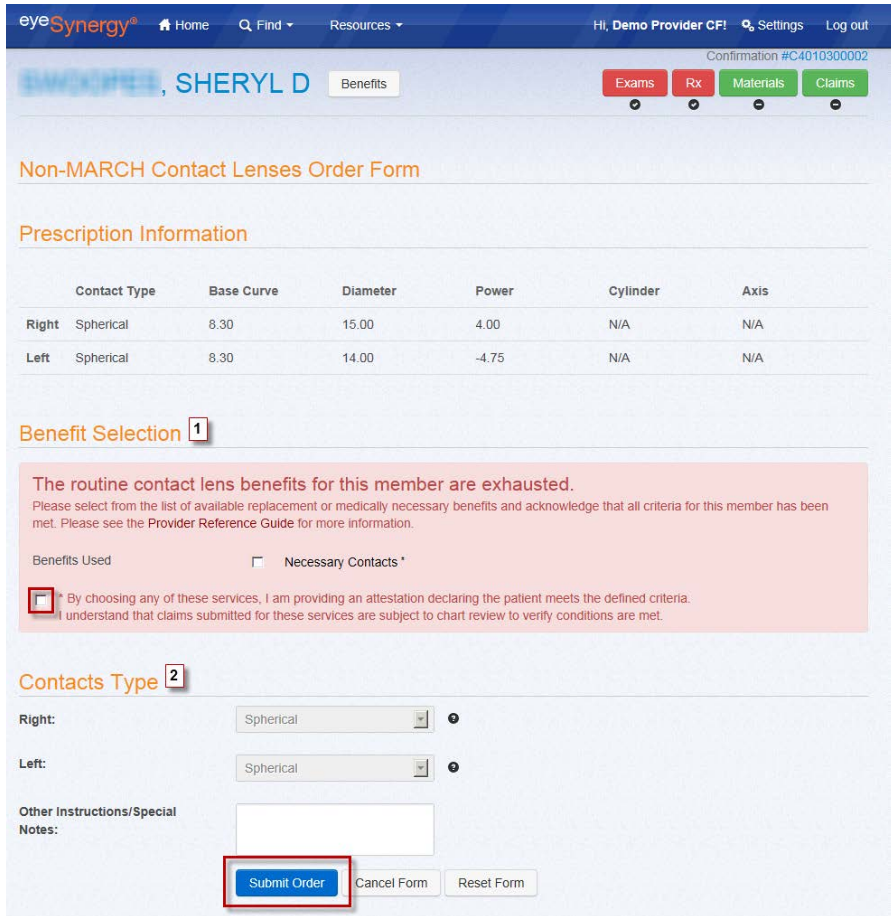
1. Lens Information
   a. Benefits Used (check applicable box)
   b. Attestation that the member has met the criteria for the selected benefits
   c. Lens Options
   d. Coating
2. Lens Extras Benefit Selection
3. Frame Information
   a. Benefits Used
   b. Frame



Non-MARCH® Contact Lens Order Form (not available in every state)

The MARCH® Contact Lens Order Form is used when the provider is **not** required to use a MARCH® lab and chooses to fulfill their patient's contact lens order using their own facilities or a non-MARCH® lab. The order form will auto-populate the prescription information based on what was entered in the Rx portion of eyeSynergy®. The following information also needs to be completed before the order can be submitted successfully:

1. Benefit Selection
   a. Benefits Used (check applicable box)
   b. Attestation that the member has met the criteria for the selected benefits
2. Contacts Type
   a. Right (drop down menu)
   b. Left (drop down menu)
   c. Other Instructions/Special Notes (if applicable)

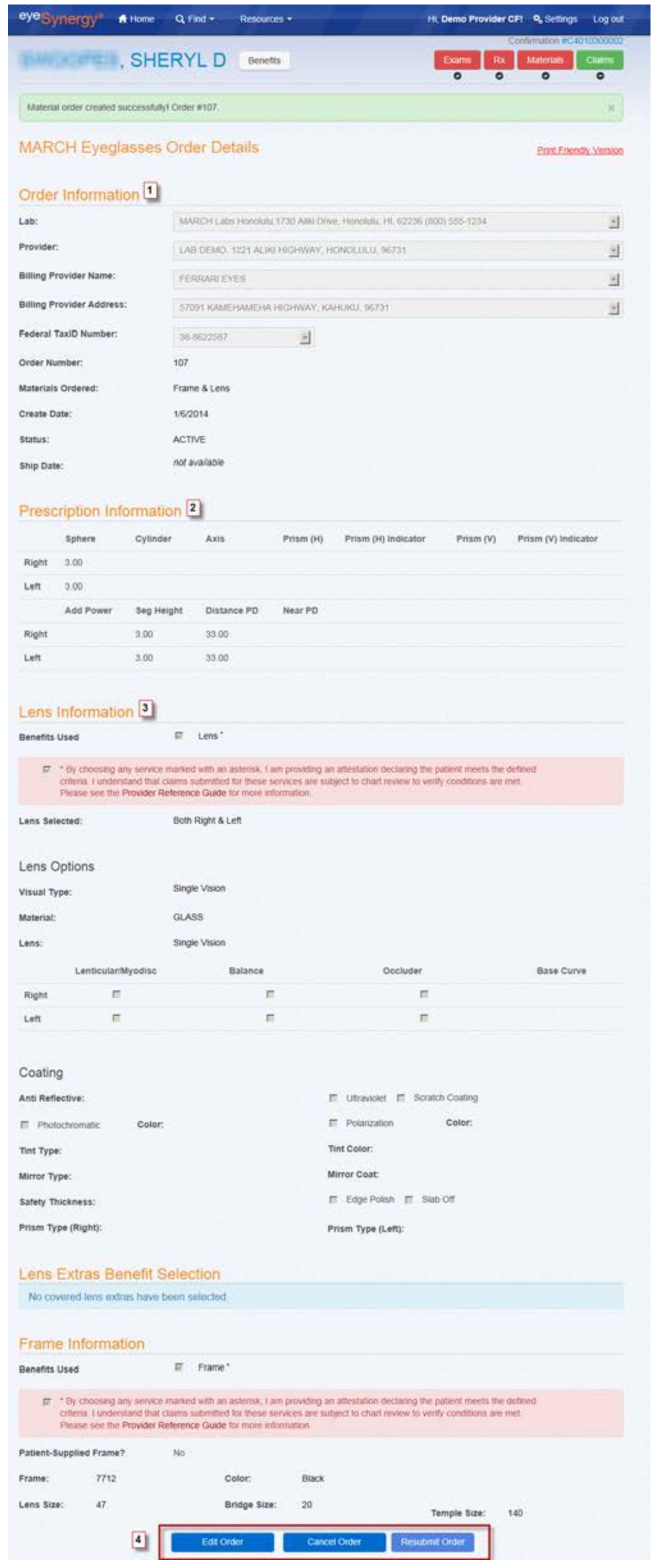


**Note: When possible, some fields on the order forms will auto-populate.*

Material Order Details

After the materials order is submitted, a message stating that the order was created successfully, along with the order number, will be displayed on the Order Details page. Additional information can also be found on this page, including:

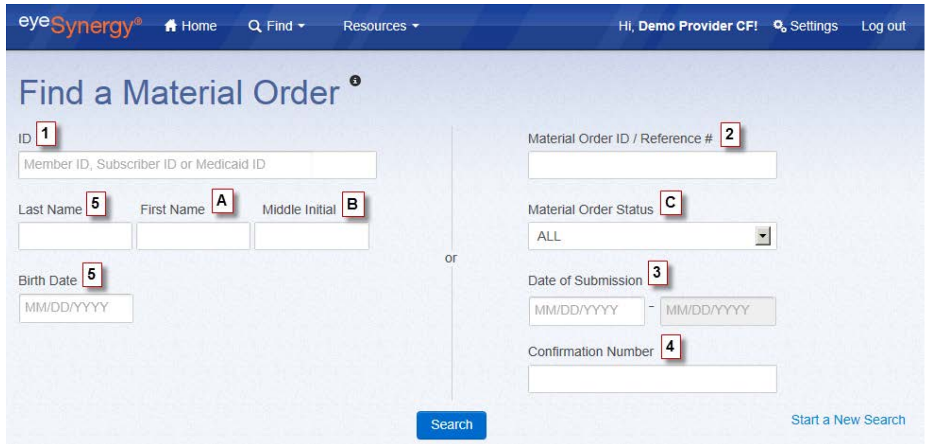
1. Order Information
2. Prescription Information
3. Contacts Type or Lens Type/Frame Information
4. Ability to cancel or edit order up to four (4) hours of order submission
    a. When canceling an order, the user will be prompted to select a reason why the order is being cancelled
    b. To cancel or edit an order after the four (4) hour window (or when the "Cancel" button is unavailable), please contact MARCH® Vision Care directly
    c. After order has been received by the provider, the user will have the ability to Resubmit Order if needed



Material Order Search

To search for an order, select the *Find* button on the Menu Bar and then select *Materials*. A search for the member's Material Order can be performed by entering at least one (1) of the following search parameters:

1. Member ID, Subscriber ID, or Medicaid ID
2. Material Order ID
3. Date of Submission (both Start & End Dates)
4. Confirmation Number
5. Last Name (at least first 3 characters) along with Member's Birth Date

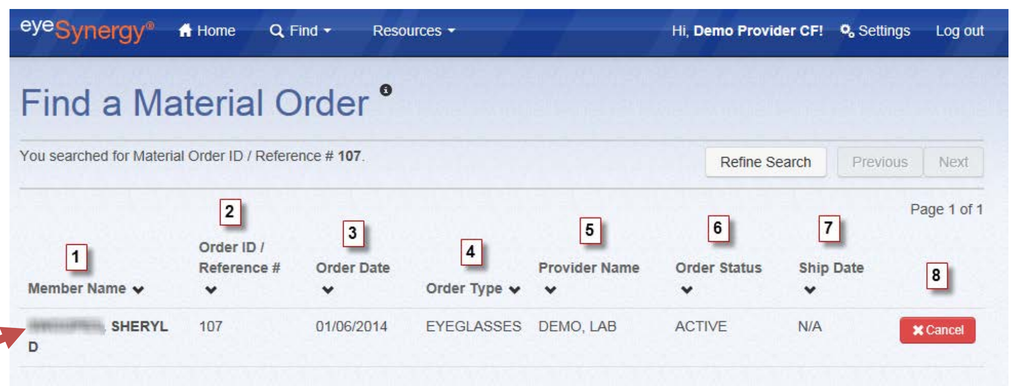


Optional search parameters include:

A. First Name
B. Middle Initial
C. Material Order Status

The search results will list the material order information for the member, including:

1. Member Name
2. Order ID
3. Order Date
4. Order Type
5. Provider Name
6. Order Status
7. Ship Date
8. Option to Cancel Order (if not processed)

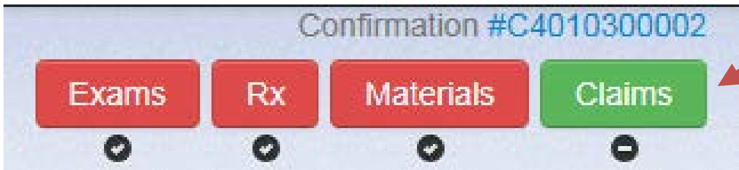


Click on the member/material order to display the completed Materials Order Form.

If the list of members is lengthy, select the *Refine Search* button and enter additional search criteria to get more specific results.

Section 9: Claims

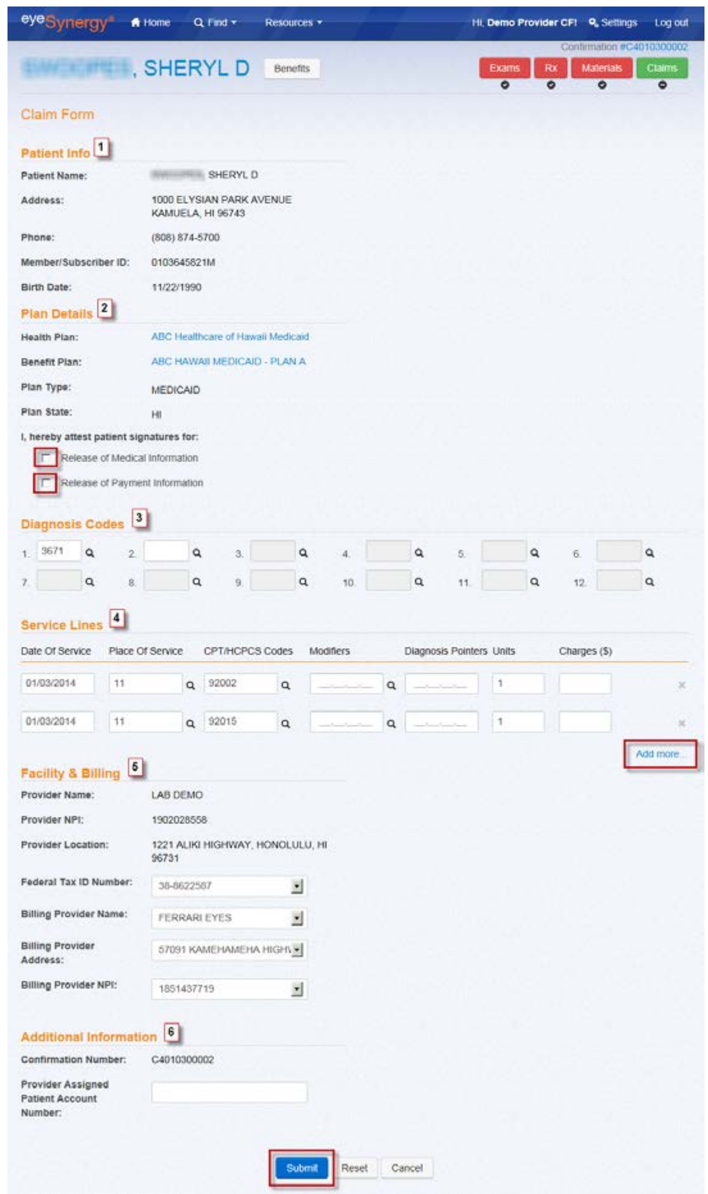
After successfully completing the sections of eyeSynergy® for the selected services, the *Claims* button on the upper right corner of the screen will become accessible, as indicated by the green color and the symbol. Select the *Claims* button to begin the claims process.



Submitting a Claim

The Claim Form will auto-populate most of the member's information based on what was entered in the previous Exams and Rx section of eyeSynergy®. Always remember to verify this form for accuracy before submitting. The sections on this claim form include:

1. Patient Info
    a. Patient Name
    b. Patient Address
    c. Phone
    d. Member/Subscriber ID
    e. Birth Date
2. Plan Details
    a. Health Plan
    b. Benefit Plan
    c. Plan Type
    d. Plan State
    e. Attestation of patient signatures for release of medical information and payment information
        - These must be selected before claim can be submitted
3. Diagnosis Codes
    a. Any diagnosis codes entered for this member in the Exams/Rx section will be auto-populated
    b. If necessary, more diagnosis codes can be directly entered in the next available box.
    c. Search for Diagnosis Codes by selecting the symbol next to the box
4. Service Lines
    a. Date Of Service
    b. Place Of Service
        - Search for Place Of Service by selecting the symbol next to the box



c. CPT/HCPCS Codes
   - Search for CPT/HCPCS Codes by selecting the symbol next to the box

d. Modifiers
   - Always start by entering the numbers from left to right
   - Place a comma between each number if entering multiple numbers
   - Search for Modifier Codes by selecting the symbol next to the box

e. Diagnosis Pointers
   - Always start by entering the numbers from left to right
   - Place a comma between each number if entering multiple numbers
   - These numbers must correspond with the Diagnosis Code box numbers

f. Units

g. Charges ($)

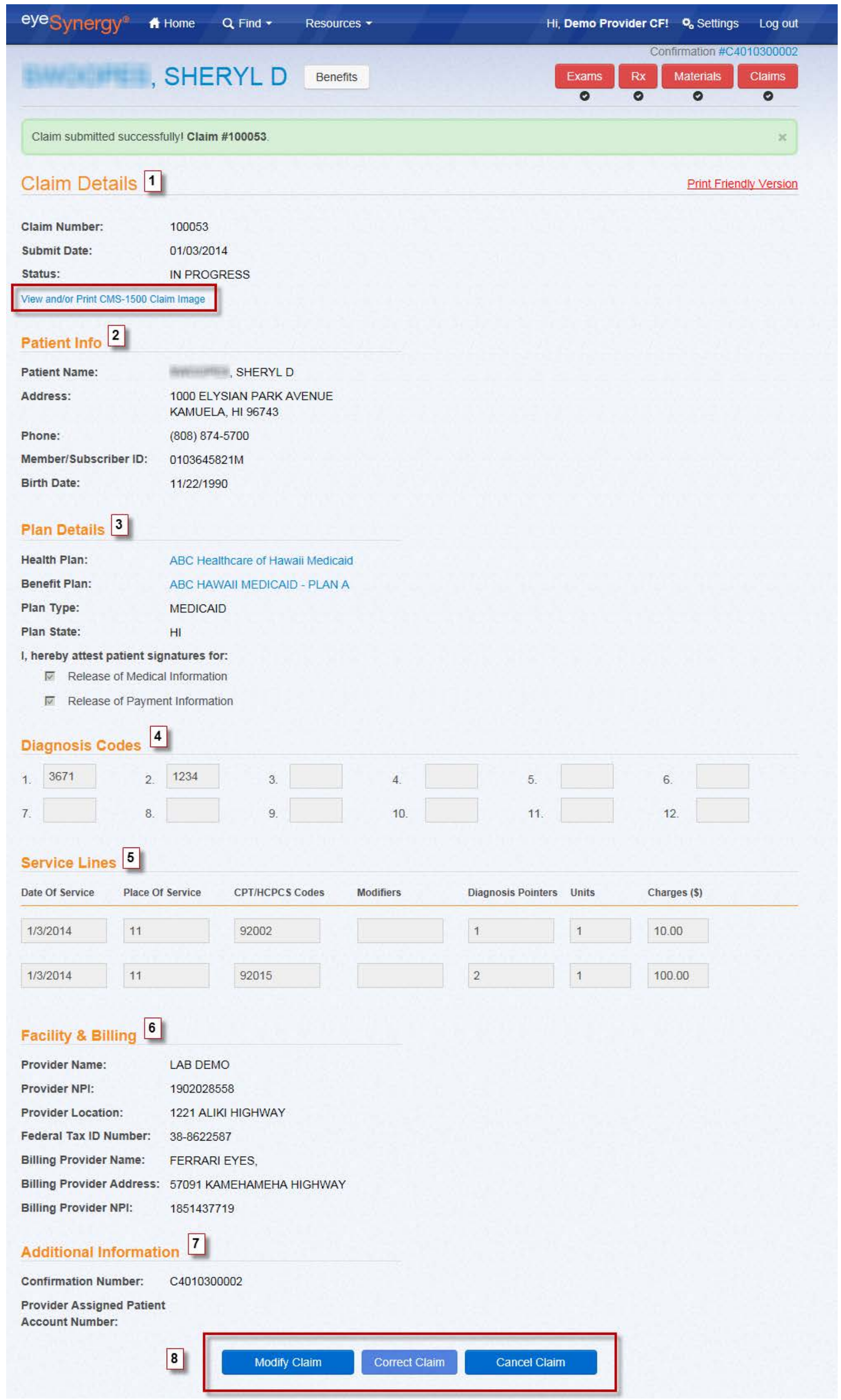
h. If more service lines are needed, select the "*Add more…*" button, located under the right side of the last service line

5. Facility & Billing
   a. Provider Name
   b. Provider NPI
   c. Provider Location
   d. Federal Tax ID Number
   e. Billing Provider Name
   f. Billing Provider Address
   g. Billing Provider NPI
6. Additional Information
   a. Confirmation Number
   b. Provider Assigned Patient Account Number (optional)

Claim Details Page

After the claim is submitted, a message stating that the order was created successfully, along with the claim number, will be displayed on the Claim Details page. All information submitted on the claim can be viewed on this page, including:

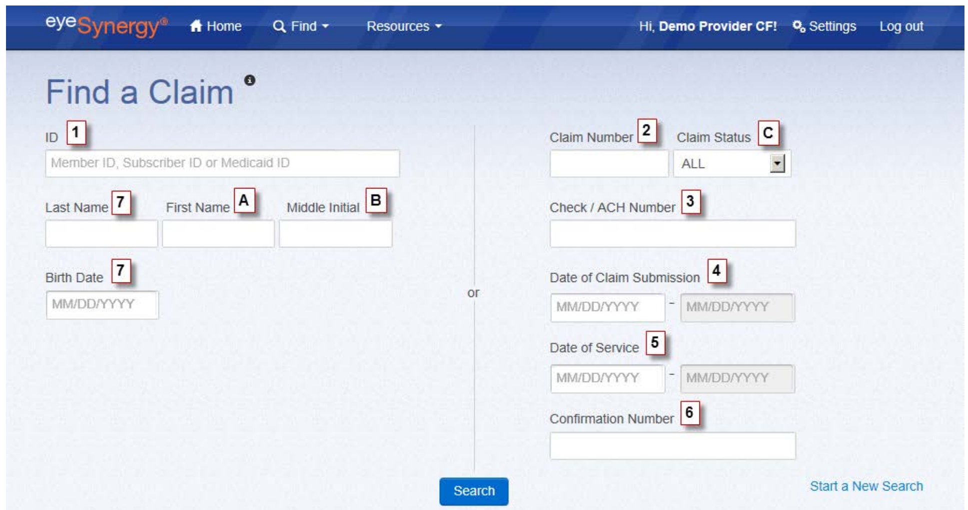
1. Claim Details
   a. Claim Number
   b. Submit Date
   c. Status
   d. Ability to view and/or print CMS-1500 claim image
2. Patient Information
3. Plan Details
4. Diagnosis Codes
5. Service Lines
6. Facility & Billing Information
7. Additional Information
8. Ability to:
   a. Modify Claim
      i. Edit information on a claim within 24 hours of claim submission. This must be done after a claim is submitted, but before a claim is processed
   b. Correct Claim
      i. A corrected claim is used to correct a claim that has already been submitted and processed
   c. Cancel Claim
      i. The Cancel Claim option is available between the time the claim has been submitted through when the claim has been processed
      ii. When canceling a claim, the user will be prompted to select a reason why the claim is being cancelled



Claim Search

To search for a claim, select the *Find* button on the Menu Bar and then select *Claims*. A search for the member's claim can be performed by entering at least one (1) of the following search parameters:

1. Member ID, Subscriber ID, or Medicaid ID
2. Claim Number
3. Check/ACH Number
4. Date of Submission (both Start & End Dates)
5. Date of Service (both Start & End Dates)
6. Confirmation Number
7. Last Name (at least first 3 characters) along with Member's Birth Date

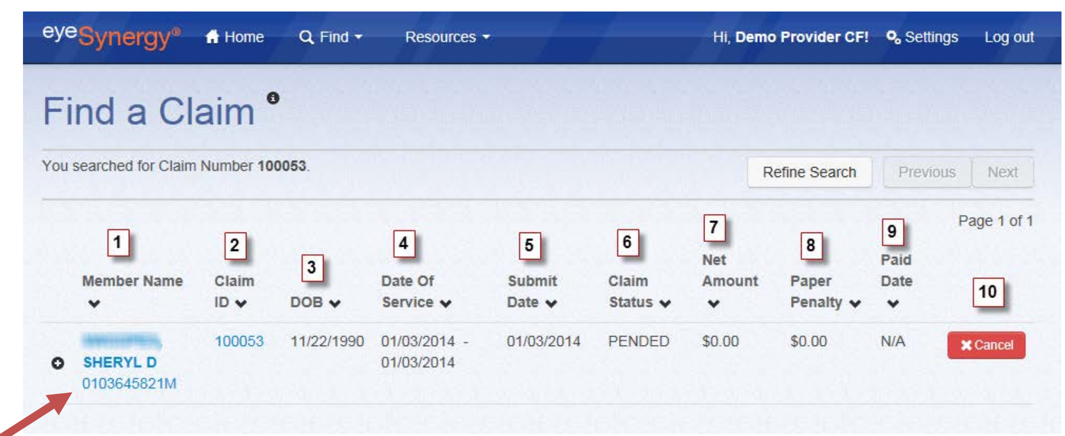


Optional search parameters include:

A. First Name
B. Middle Initial
C. Claim Status

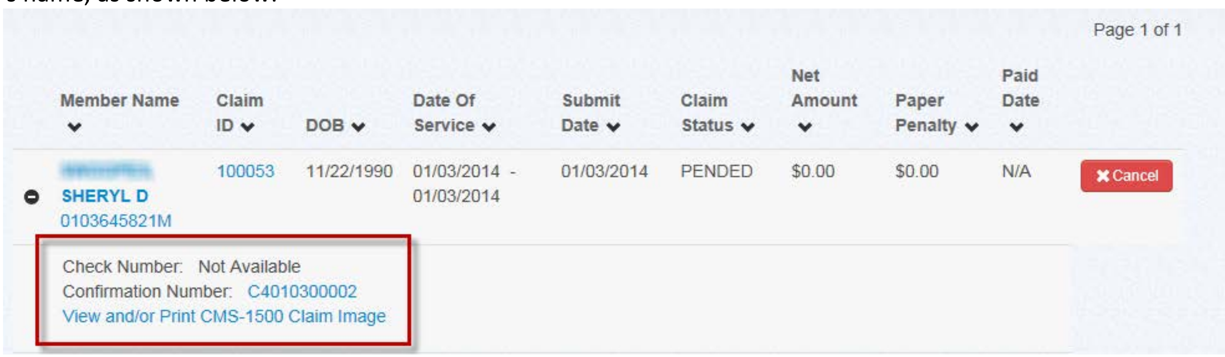
The search results will list the claim information for the member, including:

1. Member Name
2. Claim ID
3. DOB
4. Date Of Service
5. Submit Date
6. Claim Status
7. Net Amount
8. Paper Penalty
9. Paid Date
10. Option to Cancel Order (if not processed)



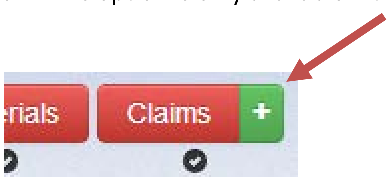
Click on the member/claim to display the Claim Details page. If the list of members is lengthy, select the *Refine Search* button and enter additional search criteria to get more specific results.

To view the Check Number, Confirmation Number, or to view/print the CMS-1500 claim image without going into the Claim Details page, select the button next to the member's name. The claim information will display directly underneath the member's name, as shown below:

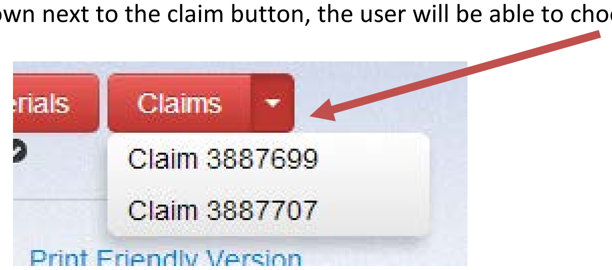


Additional Claims

If more than one (1) claim needs to be submitted under the same confirmation number, the claim button will be displayed with a green "+" symbol next to it. Click on the green "+" symbol to begin another claim form and complete another claim submission. This option is only available if the user has added services to an existing confirmation.

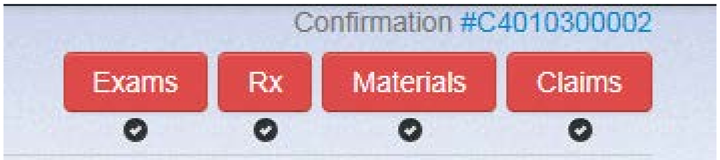


After the new claim has been submitted the green "+" will turn red, indicating that this step is complete. By clicking the drop down next to the claim button, the user will be able to choose which claim to view.



Section 10: Completing the Workflow Process

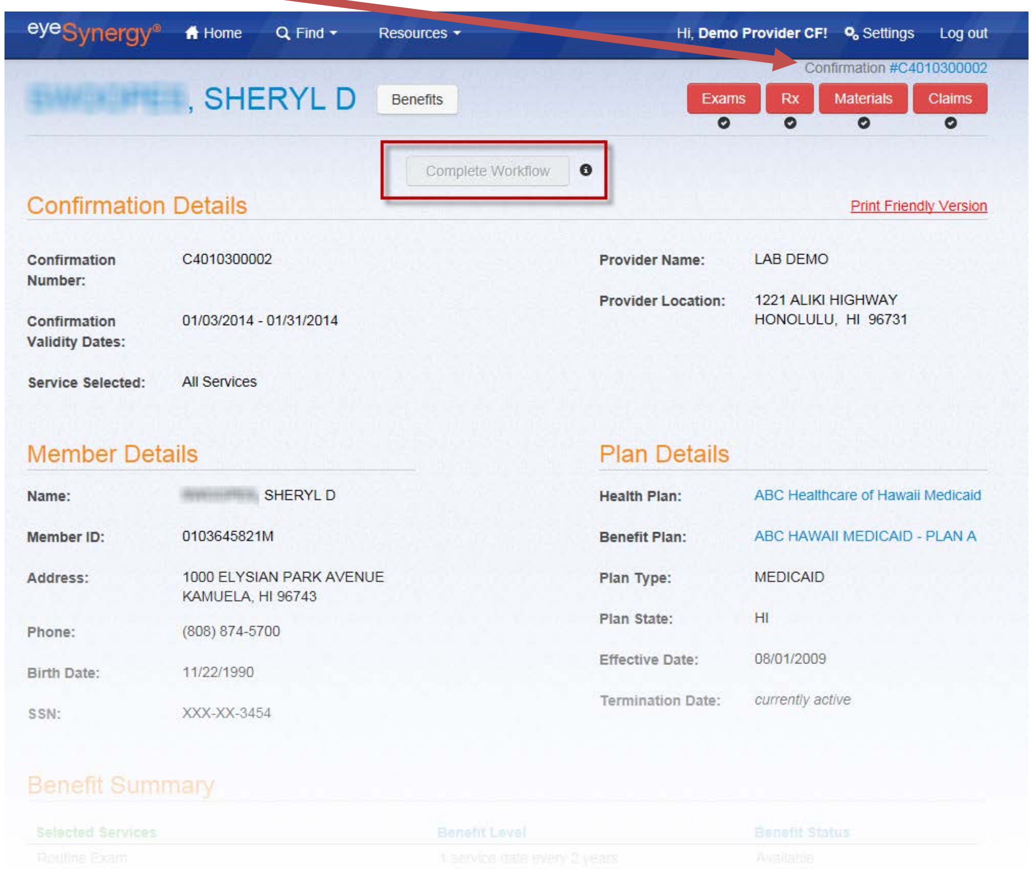
After all steps in the workflow process have been completed (as indicated by the red buttons and the symbols), the confirmation can be closed.



In most cases the confirmation will close out automatically, but if necessary the user can expedite this process by going to the Confirmation Details page and clicking the *Complete Workflow* button. As a reminder, the user can get to the Confirmation Details page by clicking the Confirmation number at the top right portion of the screen. The *Complete Workflow* button will become active after the following criteria are met:

1. Material order has been sent to the lab
   - There is a four (4) hour holding period for all material orders
2. Claims must be adjudicated successfully

Clicking the *Complete Workflow* button will close the confirmation for this member.



Thank you for using MARCH® Vision Care's web portal, eyeSynergy®! As you've just seen, this valuable online resource is the only tool you'll need to reduce paperwork, gain greater access to the information you need, and improve efficiency for providers and office staff. Questions or comments can be directed to our eyeSynergy® support team at eyesynergy@marchvisioncare.com or by calling the appropriate state-specific phone number found on our Contact Us page.