

STATEMENT OF CONTROLLED SUBSTANCE COVERAGE

Envolve Vision is NCQA certified in Credentialing and Utilization Management. In accordance with NCQA Credentialing guidelines, all practitioners that do not hold a valid DEA or CDS (state specific) certificate must arrange for another practitioner to fill prescriptions in the event pain management or additional substance treatment is required for patient care.

In order to be considered for participation on Envolve Vision’s medical panels, an applicant who does not have an active DEA and/or CDS certificate must:

- Provide an explanation as to why the applicant does not prescribe medications that require a DEA and/or CDS certificate
- Provide the name of a consultanting Optometrist/Ophthalmologist who can prescribe controlled substances when necessary. The consultant must be available to provide appropriate patient care when the use of controlled substances is indicated.

Provider Name: _____

Provider NPI: _____

Explanation of Why Applicant Does Not Prescribe Medications that Require a DEA and/or CDS certificate:

Full Name of Provider with DEA and/or CDS who will act as consultant: _____

Consulting Optometrist/Ophthalmologist Phone #: _____

Consulting Optometrist/Ophthalmologist DEA Certificate #: _____

Expiration Date: _____

and/or

Consulting Optometrist/Ophthalmologist CDS Certificate #: _____

Expiration Date: _____

I hereby certify that all the information provided on this form is true and current to the best of my knowledge. I acknowledge that I have the responsibility to notify Envolve Vision if the arrangement between providers is in any way changed or terminated.

PREPARED BY (PRINT)

DATE

SIGNATURE

**FAX COMPLETED FORM TO (877) 805-1819
ATTN: CREDENTIALING**