



LANGUAGE ASSISTANCE PROGRAM- PROVIDER SUMMARY DOCUMENT

Health Plan Name:

- March Vision Care

Threshold Language

- English

Contact for Oral Interpreter Services:

- March Vision Care's Customer Care Department
 - (888) 493-4070

Contact for Written Translation of Documents:

- March Vision Care's Customer Care Department
 - (888) 493-4070

Plan Contact for *Provider* Questions related to Plan's Language Assistance Program:

- March Vision Care's Provider Relations Department
 - (888) 493-4070
- Email: provider.relations@marchvisioncare.com

Additional resources:

- March Vision Care's Website:
 - March Vision Care provides Language Assistance Program information and resources on the provider page of our website. This information may be found at www.marchvisioncare.com
 - Additional detailed educational information on cultural competency and sensitivity can be found at our website under "Provider Tools to Care for Diverse Populations" link under the "Provider Reference Guide" tab.
- Industry Collaboration Effort (ICE) Website:
 - ICE website: www.iceforhealth.org.
 - Once on the website, follow the path: Library>Approved Ice Documents>Cultural & Linguistics Services Team folder.
 - "ICE Health Plan Resource Guide for Provider Offices"
 - To access the most recent Language Assistance Program Contact Information for many California health plans, including March Vision Care, click on or access the following link:
[http://www.iceforhealth.org/library/documents/Healthplan CA LAP Contact Shee.xls](http://www.iceforhealth.org/library/documents/Healthplan%20CA%20LAP%20Contact%20Shee.xls)
- Department of Managed Health Care
 - www.hmohelp.ca.gov.