

Vision Care and Materials Rider

This benefit includes covered services for expanded vision care.

Optima Health contracts with EyeMed to administer this benefit for vision care services and materials. With the benefit, the member is eligible to receive a routine eye examination, refraction, lenses and frames/contact lenses once every 12 months from a participating EyeMed Provider.

If an eye examination is received from an Out-of-Network provider, the member will be responsible for paying the provider in full at the time services are rendered. For covered services, members will be reimbursed by EyeMed according to the Out-of-Network benefit on the Face Sheet or Schedule of Benefits.

Members should refer to Plan documents for Plan Copayment, Coinsurances, deductible and Maximum Out-of-Pocket amounts, in addition to coverage exclusions and limitations.

To receive covered services

- Select a participating EyeMed network provider from the Plan's provider directory or by calling EyeMed at 1-888-610-2268. Automated location information is available 24 hours a day. Customer service representatives are available Monday through Saturday 7:30 a.m. – 11:00 p.m. ET and Sunday 11:00 a.m. – 8:00 p.m. ET.
- Visit or call the participating provider and identify yourself as a member by providing your Member ID information. The provider will verify eligibility, your Plan's covered services, and any applicable costs. Payment is due when you receive services.
- If the vision provider determines that you need additional medical care you should contact your Plan physician.

Additional Information

Current members with questions regarding benefits may call Member Services at the number on the back of their member ID card.

If you are considering enrolling for the first time and have questions, please contact the group's Benefits Administrator.

A telecommunications device for the hearing impaired can be accessed by dialing 1-800-828-1140 or 711.