

# Vision Plan Frequently asked questions

## 1. Q: How do I check my coverage? When do my benefits start?

**A:** To make sure you're covered, visit **myuhcvision.com**. Or call the customer care line at **1-800-638-3120**. Customer care is open Monday through Friday, 7 a.m. to 10 p.m. CT.

#### 2. Q. What is Spectera Eyecare Networks?

A: Spectera Eyecare Networks is the name of
Unitedhealthcare's national vision network, which includes
opthalmologists and optometrists. Spectera Eyecare
Networks providers are located at both private practice
and retail settings. Network eye doctors can help save
you money.

## 3. Q: How do I find an eye doctor in the network, Spectera Evecare Networks?

A: There are two ways to find a doctor:

- 1. Visit **myuhcvision.com** and use the "Find a Provider" link.
- 2. Call customer care at 1-800-638-3120.

## 4. Q: How do I let my eye doctor know I'm a UnitedHealthcare member?

**A:** When you schedule your appointment, tell the office you have UnitedHealthcare insurance. Give your last name and date of birth. You don't need to use your ID card.

#### 5. Q: How do I get an ID card?

A: Your vision plan is paperless. You don't need an ID card. If you want one, you can print a card from myuhcvision.com. Log in and click "Print ID Card" from the main page. At your appointment, you can access your ID card by logging in to myuhcvision.com from your phone or mobile device.

#### 6. Q: Can I see an eye doctor outside the network?

A: You'll save more money by seeing a network eye doctor. If you want to see a doctor outside the network, most plans cover part of your exam and eyewear. You will need to pay your bill at your appointment and submit an out-of-network claim to UnitedHealthcare to receive reimbursement. For more information, visit myuhcvision.com and select the "Out of Network Claims" link on the left-hand navigation.

## 7. Q: Can I ask UnitedHealthcare to add my eye doctor to the network?

A: If you want your eye doctor to be part of the network, visit myuhcvision.com and fill out the provider nomination form. Or call customer care at 1-800-638-3120. Our quality assurance department will review the doctor's qualifications.

#### 8. Q: How does the frame allowance work?

**A:** Visit an eye doctor in Spectera Eyecare Networks, our large national network of providers. You can use the money in your frame allowance to help pay for your eyeglass frames. After you pay your copay (if it applies), the allowance will cover 100% of the cost of many popular frames sold today.



#### 9. Q: Will I have any out-of-pocket costs for glasses?

A: You may pay a copay when you see a network eye doctor. You'll also need to pay out of pocket for any extra options you choose for your glasses (tints, coatings or lens upgrades). Network eye doctors often give discounts on these options, but ask how much your new glasses will cost before you make the purchase. If you choose frames that cost more than your frame allowance, you'll need to pay the difference. For more details, visit the "View Benefits" page on myuhcvision.com.

#### 10. Q: Can I get contact lenses instead of eyeglasses?

**A:** With most plans you can get eyeglasses OR contact lenses, but not both. For more details, visit the "View Benefits" page on **myuhcvision.com**.

#### 11. Q: How do I get contact lenses?

**A:** You can get contact lenses through your network eye doctor with a valid prescription. Your doctor will be able to recommend the best contact lenses for you. Contact lens benefits may vary. Check your coverage details at **myuhcvision.com**.

## 12. Q: Can I buy contacts from an eye doctor outside the network?

**A:** Yes, you can buy contacts directly at **uhccontacts.com**. You will get 10% off every order just for being a UnitedHealthcare member.

If you choose to buy your contacts from any online store, or from an out-of-network provider, you'll need to submit an out-of-network claim and your receipts to be reimbursed. See question 18 to learn how to submit a claim.

## 13. Q: What's the difference between necessary and elective contact lenses?

A: Only your eye doctor can determine if contact lenses are necessary or elective. An eye doctor may prescribe lenses for a variety of conditions, including post-cataract surgery without a lens implant; to correct extreme vision problems that cannot be corrected with spectacle lenses; with certain conditions such as keratoconus, anisometropia, irregular corneal/astigmatism, aphakia, facial deformity or corneal deformity. If your lenses are considered necessary, ask your doctor to call UnitedHealthcare.

## 14. Q: Will I have any out-of-pocket expenses for contact lenses?

**A:** Your out-of-pocket costs for your contact lenses may vary, depending on your specific vision plan. For details about your coverage and discounts, select "*My Benefits*" on **myuhcvision.com**.

If you see an eye doctor outside the network, you'll need to pay your bill in full at the time of your appointment. For details about submitting a claim for reimbursement, see question 18 or visit **myuhcvision.com**.

#### 15. Q: Does the plan cover laser vision correction?

A: No, most vision plans don't cover laser vision correction. You and your family can receive discounts on laser eye surgery through Laser Vision Network of America. To learn more, visit myuhcvision.com and select "LASIK Discounts." For complete details, visit our LASIK site at uhclasik.com.



#### 16. Q: Does the plan cover hearing tests or hearing aids?

A: No, but as a UnitedHealthcare vision plan member, you can buy premium digital hearing aids through hi HealthInnovations™. Hearing aids start at \$699 each. This isn't considered insurance, but is a discount given to you as a UnitedHealthcare member. Your health plan may provide a hearing test, hearing aid allowance or other coverage. Before you schedule a hearing test or order hearing aids, check with your medical plan to see what's covered.

For more information, review your plan details on **myuhcvision.com** under "Hearing Aid Discounts."

## 17. Q: Does hi HealthInnovations work with the hearing aid benefit offered in most UnitedHealthcare health plans?

**A:** hi HealthInnovations is not a network-based program. If your health plan has a hearing aid allowance, you can use that toward your purchases through hi HealthInnovations.

#### 18. Q: How do I submit an out-of-network claim?

A: If you see an eye doctor outside the network, you will need to pay your bill in full at the time of your appointment. To submit your claim for reimbursement, complete the out-of-network claim form and send all receipts. The claim form can be found at myuhcvision.com, by logging in and selecting the "Out of Network Claims" link on the left-hand navigation. Be sure to attach the following information to the receipts:

- Subscriber's unique ID number, name and home address
- · Patient's name and date of birth

Mail everything within 12 months of the date of service to:

#### **UnitedHealthcare Vision Claim Department**

P.O. Box 30978 Salt Lake City, UT 84130

If you prefer, fax this information to 248-733-6060.

We process out-of-network payments within 30 days of the date we receive a complete request.



#### Call toll-free. 1-800-638-3120, TTY 711.

If you don't have computer access, need language assistance or can't find answers, call us Monday through Friday, 7 a.m. to 10 p.m. CT.



The company does not treat members differently because of sex, age, race, color, disability or national origin. If you think you were treated unfairly because of your sex, age, race, color, disability or national origin, you can send a complaint to the Civil Rights Coordinator.

Online: UHC\_Civil\_Rights@uhc.com

**Mail:** Civil Rights Coordinator. UnitedHealthcare Civil Rights Grievance. P.O. Box 30608 Salt Lake City, UTAH 84130

You must send the complaint within 60 days of when you found out about it. A decision will be sent to you within 30 days. If you disagree with the decision, you have 15 days to ask us to look at it again.

If you need help with your complaint, please call 1-800-638-3120, TTY 711. You can also file a complaint with the U.S. Dept. of Health and Human Services.

**Online:** https://ocrportal.hhs.gov/ocr/portal/lobby.jsf **Complaint forms are available at** http://www.hhs.gov/ocr/office/file/index.html.

**Phone:** Toll-free 1-800-368-1019, 800-537-7697 (TDD) **Mail:** U.S. Dept. of Health and Human Services. 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201

You have the right to get help and information in your language at no cost. To request an interpreter, call the toll-free member phone number listed on your health plan ID card, press 0. TTY 711.

Tiene derecho a recibir ayuda e información en su idioma sin costo. Para solicitar un intérprete, llame al número de teléfono gratuito para miembros que se encuentra en su tarjeta de identificación del plan de salud y presione 0. TTY 711

您有權利免費以您的母語得到幫助和訊息。洽詢一位翻譯員, 請撥打您健保計劃會員卡上的免付費會員電話號碼,再按0。 聽力語言殘障服務專線711

Quý vị có quyền được giúp đỡ và cấp thông tin bằng ngôn ngữ của quý vị miễn phí. Để yêu cầu được thông dịch viên giúp đỡ, vui lòng gọi số điện thoại miễn phí dành cho hội viên được nêu trên thẻ ID chương trình bảo hiểm y tê của quý vị, bấm số 0. TTY 711

귀하는 도움과 정보를 귀하의 언어로 비용 부담없이 얻을 수 있는 권리가 있습니다. 통역사를 요청하기 위해서는 귀하의 플랜 ID카드에 기재된 무료 회원 전화번호로 전화하여 0번을 누르십시오. TTY 711

May karapatan kang makatanggap ng tulong at impormasyon sa iyong wika nang walang bayad. Upang humiling ng tawwgasalin, tawagan ang toll-free na numero ng telepono na nakalagay sa iyong ID card ng planong pangkalusugan, pindutin ang 0. TTY 711

Вы имеете право на бесплатное получение помощи и информации на вашем языке. Чтобы подать запрос переводчика позвоните по бесплатному номеру телефона, указанному на обратной стороне вашей идентификационной карты и нажмите 0. Линия ТТҮ 711

لك الحق في الحصول على المساعدة والمعلومات بلغتك دون تحمل أي تكلفة. لطلب مترجم فوري، اتصل برقم الهاتف المجاني الخاص بالأعضاء المدرج ببطاقة مُعرَف العضوية الخاصة بخطتك الصحية، واضغط على 0. الهاتف النصي (TTY) (TTY)

Ou gen dwa pou jwenn èd ak enfòmasyon nan lang natifnatal ou gratis. Pou mande yon entèprèt, rele nimewo gratis manm lan ki endike sou kat ID plan sante ou, peze 0. TTY 711

Vous avez le droit d'obtenir gratuitement de l'aide et des renseignements dans votre langue. Pour demander à parler à un interprète, appelez le numéro de téléphone sans frais figurant sur votre carte d'affilié du régime de soins de santé et appuyez sur la touche 0. ATS 711.

Você tem o direito de obter ajuda e informação em seu idioma e sem custos. Para solicitar um intérprete, ligue para o número de telefone gratuito que consta no cartão de ID do seu plano de saúde, pressione 0. TTY 711

Masz prawo do uzyskania bezpłatnej informacji i pomocy we własnym języku. Po usługi tłumacza zadzwoń pod bezpłatny numer umieszczony na karcie identyfikacyjnej planu medycznego i wciśnij 0. TTY 711

Sie haben das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um einen Dolmetscher anzufordern, rufen Sie die gebührenfreie Nummer auf Ihrer Krankenversicherungskarte an und drücken Sie die 0. TTY 711

ご希望の言語でサポートを受けたり、情報を入手したりすることができます。料金はかかりません。通訳をご希望の場合は、医療プランのIDカードに記載されているメンバー用のフリーダイヤルまでお電話の上、0を押してください。TTY専用番号は711です。

شما حق دارید که کمک و اطلاعات به زبان خود را به طور رایگان دریافت نمایید. برای درخواست مترجم شفاهی با شماره تلفن رایگان قید شده در کارت شناسایی برنامه بهداشتی خود تماس حاصل نموده و ۰ را فشار دهید. TTY 711

Hai il diritto di ottenere aiuto e informazioni nella tua lingua gratuitamente. Per richiedere un interprete, chiama il numero telefonico verde indicato sulla tua tessera identificativa del piano sanitario e premi lo 0. Dispositivi per non udenti/TTY: 711

This policy has exclusions, limitations and terms under which the policy may be continued in force or discontinued. For costs and complete details of coverage, contact UnitedHealthcare Insurance Company.

UnitedHealthcare vision coverage provided by or through UnitedHealthcare Insurance Company, located in Hartford, Connecticut, UnitedHealthcare Insurance Company of New York, located in Islandia, New York, or their affiliates. The contracting entity for Spectera Eyecare Networks is Spectera, Inc. Administrative services provided by Spectera, Inc., United HealthCare Services, Inc. or their affiliates. Plans sold in Texas use policy form number VPOL.06.TX or VPOL.13.TX and associated COC form number VCOC.INT.06.TX or VCOC. CER.13.TX. Plans sold in Virginia use policy form number VPOL.06.VA or VPOL.13.VA and associated COC form number VCOC.INT.06.VA or VCOC.CER.13.VA.

