



Columbia University

# UnitedHealthcare Vision



Your vision is important to your health. Whether your vision is 20/20 or less than perfect, everyone should receive regular vision care. The UnitedHealthcare Vision® benefit provides coverage for a comprehensive eye examination, as well as eyeglasses (lenses and frame), and/or contact lenses. For medical conditions associated with your eyes, consult your medical provider under your UnitedHealthcare Medical plan.

**1. Q: How do I verify my coverage and when I am eligible to receive benefits?**

**A:** You may verify your eligibility and plan coverage online at [myuhc.com](http://myuhc.com), click “Benefits & Coverage”, “Vision” and then “Vision Benefit Highlights” to access the vision website. You may also call our customer care line at **1-800-232-9357**, say “Benefits”, then “Vision”.

**2. Q: How do I find a provider in the vision network?**

**A:** There are two ways for you to find a provider.

- 1) Visit the vision website and use the “*Finding a Provider*” link
- 2) Call UnitedHealthcare customer service at **1-800-232-9357**, say “Benefits”, then “Vision”.

**3. Q: Can I go to a vision care provider outside of the UnitedHealthcare Vision network?**

**A:** Depending on the plan you are enrolled in you may use a provider outside of our network. You will be required to pay at the time of service and request reimbursement from UnitedHealthcare. You can also check the out-of-network claims link located on the benefit information page on the vision website. Please follow the directions listed under Question #10, “*How do I submit a claim?*”



**4. Q: How do I nominate a non-network provider to become part of the UnitedHealthcare Vision network?**

**A:** You can nominate a provider by completing the Provider Nomination Form on the vision website or by calling customer service at **1-800-232-9357** say “Benefits”, then “Vision”. All nominated providers are subject to credentialing through our Quality Assurance Department.

**5. Q: How do I identify myself as a UnitedHealthcare Vision participant?**

**A:** When scheduling your appointment, tell the provider you have UnitedHealthcare Vision coverage. Give your last name and date of birth. No ID card is necessary to use your vision benefit.

**6. Q: How do I get a vision ID card?**

**A:** With our paperless benefits and claims, you do not need a vision ID card to use your benefits. However, if you'd like one, you may print one from the vision website. Once you've logged in, click on “*Print ID Card*” from the member web portal.

**7. Q: How does the retail frame allowance work?**

**A:** When you visit a provider in the large UnitedHealthcare Vision network, you will receive an allowance that can be applied to the cost of your eyeglass frame. Any balance after your frame allowance has been applied is your responsibility. If you use a non participating provider refer to [Question #10](#).

**8. Q: What out-of-pocket expenses will I incur for eyeglasses?**

**A:** When visiting an in network provider, you will have to pay any applicable copayments, amounts over your benefit allowance(s) and any upgrade options you select (i.e. tints, coatings and lens upgrades). It is best to verify your balance due with your provider prior to making your purchase. If you choose a frame that is more than your allowance, you are responsible for the difference between the allowance and the cost. Please click on the “*View Benefits*” page on the vision website to get details about your plan.

**9. Q: Can I get contact lenses instead of eyeglasses?**

**A:** You are entitled to eyeglasses and/or contact lenses in a calendar year. Please click on the “*View Benefits*” page from the vision website for details of your coverage.

**10. Q: How do I submit a claim?**

**A:** Under UnitedHealthcare Vision's program, you do not have to complete paperwork for in-network services.

You are only asked to submit receipts for out-of-network services - a Claim Form is not required. To access out-of-network benefits, simply pay the out-of-network provider in full for all services and materials received. Out-of-network reimbursements are processed within 30 days from the date we receive a complete request.

The following information must be attached to the receipts:

- ▶ Subscriber's unique identification number, name and home address
- ▶ Patient's name and date of birth

You may fax or mail this information to:

UnitedHealthcare Vision Claims Department  
 P.O. Box 30978  
 Salt Lake City, UT 84130  
 Fax: 248-733-6060



**11. Q: Is laser vision correction a covered benefit?**

**A:** No. UnitedHealthcare offers access to discounted laser eye surgery procedures through Laser Vision Network of America (LVNA) in conjunction with your vision care program. You and your family receive discounts from highly reputable providers throughout the United States. Go to the vision website and select *"Discounts on LASIK"*.

**12. Q: What do I do if I have other questions?**

**A:** UnitedHealthcare Vision's customer service representatives are available to answer any questions you may have regarding your benefits by calling **1-800-232-9357**, say "Benefits", then "Vision". All representatives are trained in the specifics of each plan. Bilingual customer service representatives are available for non-English speaking members.



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. 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.