

UPMC Health Plan offers vision benefits through an arrangement with Vision Benefits of America (VBA), a comprehensive nationwide network of eye care providers that has been managing group vision benefits for more than 40 years. Through its more than 13,000 participating optometrists, ophthalmologists, and retail optical facilities, VBA provides managed vision care to more than 1 million members across the country.

**What are my benefits through VBA?**

Your benefit plan includes the following:

- a complete exam of your eyes and related structures to determine the presence of any vision problems
- a pair of clear, standard lenses
- a \$40 wholesale allowance toward eyeglass frames (represents approximately \$90 to \$110 in retail value)

You and your adult dependents (age 19 or older) are eligible for these services once every 24 months. Your dependents younger than 19 years of age are eligible for an exam and lenses every 12 months and frames every 24 months.

When you choose a VBA network provider to supply these goods and services, you will incur lower out-of-pocket costs. You will pay a \$15 copayment for your eye exam, plus the amount (if any) that your frames exceed your \$40 wholesale allowance. Remember that if you select optional features for your lenses, like tints or photographs, you are responsible for any additional charges for these features.

All VBA members will receive 15% off of the usual and customary fees on LASIK vision correction at any of the 80-plus TLC Vision Centers nationwide.

You do have the option to visit non-VBA network eye care professionals, but their services will be covered at a lower level of benefits and you will have higher out-of-pocket costs. Please refer to the chart below to determine the copayments and allowance amounts that apply to you.

**VBA Vision Care Program (Exam Plus – Plan #504)**

<b>Benefit</b>	<b>Amount covered, less copayment (if a VBA provider performs services)</b>	<b>Amount reimbursed (if a non-VBA provider performs services)</b>
Vision exam	100% after copayment*	\$20
Clear standard lenses (pair of single vision, bifocal, trifocal, lenticular, or progressive lenses)	100% (with 1 free year scratch protection coverage)	\$50
Clear standard lenses (pair made of polycarbonate lens material) **	100%	N/A
Frame	100%***	\$50
Contacts, selected instead of glasses (includes vision exam allowance)	\$100 towards exam and contacts	\$100 towards exam and contacts
Contacts, medically required (includes vision exam allowance)	UCR****	\$250 towards exam and contacts
Low vision aids (includes vision exam allowance)	UCR****	\$500 towards exam and contacts

Policyholder and adult dependents are each eligible for a vision exam, lenses, and frames once every 24 months. Policyholder's covered children (younger than 19 years of age) are each eligible for a vision exam and lenses once every 12 months, and frames once every 24 months.

- \* A \$15 copayment applies to the vision exam.
- \*\* Available in-network at no charge for children under the age of 19.
- \*\*\* Within the program's \$40 wholesale allowance (approximately \$90 to \$110 retail value).
- \*\*\*\* Usual, customary, and reasonable as determined by VBA.

**What if I want contact lenses instead of glasses?**

VBA considers contact lenses to be elective in nature. Therefore, if you choose contact lenses instead of glasses, your VBA benefits will cover the cost of your contact lenses (and the exam required to get those lenses) only up to a certain dollar amount. You are responsible for any vision exam or contact lens costs over your VBA allowance. Please refer to the chart on the previous page to determine your VBA contact lens allowance.

VBA may make exceptions to this policy for cases in which a provider confirms that the contact lenses are medically necessary.

**Why should I use a VBA network provider for my vision care?**

When you choose VBA network providers to supply your vision care, you will incur lower out-of-pocket costs. You do have the option to visit non-VBA network eye care professionals, but VBA covers goods and services from non-participating providers at a lower level of benefits and you will have higher out-of-pocket costs.

Using a VBA vision professional also ensures the quality of your eye care. All of the providers in VBA's network have agreed to adhere to VBA's strict examination standards.

**What do I have to do to use my VBA benefits?**

Before you can receive covered services, you must obtain a validated VBA benefit form by doing one of the following:

- Call VBA toll-free at **1-800-432-4966**. VBA customer service personnel are available from 8:30 a.m. to 7:00 p.m., Monday through Friday.

An automated benefit request line also operates at this same number, 7 days a week, 24 hours a day. Simply call **1-800-432-4966** and press "4," then follow the prompts. You will need to know the member ID number (Social Security number), home zip code, and date of birth for the member for whom you are requesting the form. This is the fastest and easiest way to request a VBA benefit form.

- Visit VBA's website at **[www.visionbenefits.com](http://www.visionbenefits.com)**

If you are eligible for benefits, within approximately one week you will receive a valid benefit form and a list of VBA providers in your area. You can then make an appointment with the provider of your choice.

To take full advantage of your coverage, you must present the VBA benefit form to your eye care provider at your first visit. If you do not present the benefit form to your provider, you run the risk of being charged higher fees. You must use the VBA benefit form within 90 days of the issue date on the form.