

Routine Vision Benefits

What is the routine vision benefit in Kaiser Permanente plans?

If you are in the Kaiser Permanente HMO, your routine vision care benefits are provided by a Kaiser Permanente doctor and Kaiser Permanente facilities. In the Added Choice POS Plan, you can use your eyewear allowance only at Kaiser Permanente facilities.

- HMO Plan:
 - Routine exam \$5
- POS Plan Routine exam:
 - Kaiser Provider \$10
 - In-network Provider 15%
 - Out-of-network Provider 30%

Both plans offer a \$200 eyewear allowance. In both plans, vision eyewear is provided every 24 months or when vision changes 0.5 diopter within 12 months of the initial exam.

Call Kaiser Permanente or visit its Web site to see what doctors are in the HMO and what doctors are in the Added Choice network panel.

What is the routine vision benefit in the PPO plans?

VSP (Vision Service Plan) provides routine vision benefits in the Providence, Regence and Samaritan PPO plans according to the following schedule:

- Adults:
 - Every 24 months for exam, lenses and frames.
- Children under age 17:
 - Every 12 months for exam, lenses and frames.

When you get services from a VSP doctor, you pay a \$10 co-payment. In addition to the \$200 allowance toward the cost of materials, you get a 20 percent discount off the VSP doctor's usual and customary fees for prescription glasses.

NOTE: If you do not use the entire allowance at one time, you forfeit the balance.

A 15 percent discount applies to the doctor's professional services for all types of prescription contact lenses. Discounts are good only for 12 months after date of service of the exam and provided from the same doctor who performed the exam.

Obtaining services from a VSP doctor

When you want to get vision care services, call a VSP doctor to make an appointment. VSP does not provide a member ID card, so make sure you provide the covered member's PEBB Benefit Number. The VSP doctor will contact VSP to verify your eligibility and plan coverage and will also obtain authorization for services and materials. Call VSP or visit the Web site to find VSP doctors in your area.

Obtaining services from a non-VSP provider

If you have an eye exam or purchase materials from an out-of-network provider, you pay the full cost of the exam and materials; the plan will reimburse you up to a maximum of \$42 of the exam cost and up to \$200 for materials, minus your \$10 co-payment. To obtain reimbursement after you use an out-of-network provider, pay the entire bill when you receive services, then send your itemized receipts and full patient and member information to VSP.

Claims must be submitted to VSP within six months from your date of service. Submit your itemized receipt with the employee's name, PEBB Benefit Number, mailing address, patient name, date of birth, and relationship to employee to VSP. Call VSP with questions about the vision benefit.

What is the vision benefit in the Part-time and Retiree Plans?

These plans do not have a routine vision benefit, with the exception of a covered exam in the Kaiser HMO and POS plans, when given by a Kaiser provider.