

Vision Insurance

Driving to work, reading a news article and watching television are likely activities you perform every day. Your ability to do all of these, however, depends on your vision and eye health. Routine eye exams will help maintain your vision as well as detect various eye problems and concerns about your overall health. Obtaining vision insurance is a way to make sure you can continue enjoying good health as well as the sights around you.

What is Vision Insurance?

Vision coverage is similar to regular medical insurance and is one of the voluntary benefit options commonly offered through employers. When you have vision insurance, you pay a premium and the insurance company will cover part or all of the cost for vision care. Vision coverage is available in two basic types of plans:

- Vision benefits plan—This type of plan is regular insurance coverage. Depending on the specific plan, coverage may differ between in- and out-of-network eye doctors. You will typically pay a portion of your eye care cost through a deductible and coinsurance or copayments.
- Discount vision plan—With this option you can choose to reduce vision costs without regular insurance coverage. You pay for all your vision care, but at a reduced rate.

Why Should I Have Vision Insurance?

A visit with your eye doctor can determine whether you need corrective lenses and, if so, the correct prescription. Other eye concerns that will be addressed in an eye exam include checking for conditions or diseases such as glaucoma and cataracts, which can lead to vision loss.

Regular eye exams can also identify overall health concerns, such as diabetes, high cholesterol and risk of heart disease or stroke before you are even aware of any symptoms. You can then follow up with a medical doctor, minimizing the effects of these conditions on your health and finances.

What is Covered Under Vision Insurance?

Vision insurance generally provides coverage for basic care and eyewear. Most vision plans will cover the following services:

- Annual or biannual eye exams, including dilation
- Eyeglass frames
- Eyeglass lenses
- Contact lenses

Some plans may also cover other services, including laser vision care programs or even prescription protective eyewear that is compliant with ANSI and OSHA safety guidelines.

Vision plans typically do not cover replacements for frames, eyeglass lenses or contact lenses, medical or surgical treatment, vision training or experimental vision services or treatments.

How Does Vision Insurance Work?

For vision coverage, you pay a premium or membership fee. Then, when you visit your eye doctor or purchase corrective lenses, you pay a reduced amount for services. Eye exams will typically be covered at 100 percent or have a small copay. Corrective lenses are usually covered with a copay or a maximum allotted amount per year. If you are given an allotted amount, you would only have to pay if the eyewear exceeds that amount. For example, if your insurance covers eyeglass frames up to \$120 and the frames cost \$160, you would only have to pay the additional \$40. Other services, such as eye surgery or treatment for eye diseases, are usually covered at a reduced rate.

Most plans will place limits on their coverage for eyewear. For example, a plan might cover a new set of eyeglass lenses once a year, eyeglass frames once every two years and contact lenses once a year. Many plans will further limit coverage to either

eyeglasses or contact lenses during a plan year. Plans vary, so make sure you read your benefit information carefully.

How has Health Care Reform Affected Vision Insurance?

The Affordable Care Act (ACA) does affect some vision benefit plans. If your vision coverage falls under the new ACA rules, then the vision plan will have to cover adult children up to age 26, and lifetime and annual limits on coverage will be eliminated. If the vision plan is of limited scope, then it is considered an excepted benefit and does not have to follow the new rules. Limited-scope plans include vision benefits provided under a policy separate from regular medical benefits, or vision benefits that are not an “integral part” of the group health plan.

In addition, under the ACA, pediatric vision care is considered an essential health benefit. This means that vision coverage must be available for children under the age of 19. The ACA does not consider vision care an essential health benefit for adults, so vision care is not mandatory for individuals 19 years and older. Unlike medical insurance, there will be no penalty for not purchasing vision insurance. For further information on the ACA and vision insurance, visit www.dol.gov/ebsa/faqs/faq-aca2.html.

We're here to help! [Contact Sentinel Benefits & Financial Group](#) for the guidance you need.

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