



THE PLAN IS EASY TO USE • NO BENEFIT FORM REQUIRED

It is a pleasure to welcome you as a member of VisionCare Plan. To get the most out of your coverage, please follow these steps:

- 1. Just before you schedule an appointment for eye care, look at the list of network doctors in your area. Select a doctor from the list and call for an appointment. Please be sure you have your policy and member numbers when you call. Both numbers are located on your ID card below.
2. Give the doctor your name, the patient's name, member number, policy number and name of your employer. The doctor's office will schedule your appointment, and will verify your eligibility and benefits before your visit.
3. After your exam, the doctor will have you sign a VisionCare Plan form. You'll also pay any copays and/or the cost of any upgrades at this time. VisionCare will pay the doctor according to their agreement.

Please detach the card below, and give to your eye doctor at the time of your appointment

P.O. Box 30349
Tampa, FL 33630-3349
1-800-865-3676
www.visioncare.com



Planholder:

City of Coral Springs, Florida 207182
Name of Group Policy Number

Member Name Member Number

MEMBERS:

1. Select a doctor from the VisionCare list of network doctors and call for an appointment.
2. Provide the doctor with your name, the patient's name, member number, policy number and the name of your employer.
3. Present your ID card at the doctor's office.

NETWORK DOCTORS:

1. Obtain the patient's name, member's name and number, policy number, and the name of the employer.
2. Call VisionCare Plan's Customer Care Department at (800) 865-3676 for an authorization number.

FOR QUESTIONS

If you have any questions about your benefits, call (800) 865-3676

Underwritten by CompBenefits Insurance Company and administered by Vision Care, Inc. In Florida, underwritten and administered by Vision Care, Inc./Out of Network Benefits underwritten by CompBenefits Insurance Company.

USING YOUR INDEMNITY BENEFITS

From time to time, you may have questions about your indemnity vision benefits. We have anticipated what some of those questions may be and have provided the answers for you below. Understanding how your vision plan works will allow you to get the most out of your plan. Please take a moment to read your Certificate so that you will understand the benefits available to you. The terms, benefits, and limitations of your vision plan are shown on page 9 of your Certificate.

Where can I receive benefits?

You may receive benefits from any licensed Optometrist or Ophthalmologist of your choice

Do I have to pay the provider at the time services are rendered?

Yes, you are responsible for paying the provider in full at the time services are rendered unless the provider accepts assignment or is willing to make other arrangements with you.

How do I get reimbursed for covered services?

You must provide us with itemized bills for all charges within one year of the date of service or receipt of materials, and mail it to us at P.O. Box 30349, Tampa FL 33630-3349. Please include your name, address, member number and policy number. We will reimburse you for covered charges up to the allowance shown in your Schedule of Benefits or, if you prefer, you may request to have your benefits paid directly to the provider. Please be reminded that you are responsible for all costs and fees in excess of the allowance in addition to any services or materials not covered under your plan.

What if I have other questions?

We have qualified staff trained to answer your questions. Please call us at 1-800-749-5855 for further information.