

**Did you know the following health conditions may be identified through a routine vision exam?**



**Diabetes**



**High blood pressure**



**Lupus**



**Multiple sclerosis**



**Rheumatoid arthritis**

**If you have one of these conditions, make sure to get your annual routine vision exam.**

**EyeMed Customer Service Toll Free 833-279-4361 (TTY 711)  
Monday–Saturday from 6:30 a.m. to 10 p.m. and  
Sunday from 10 a.m. to 7 p.m.**



**Network Health Member Experience  
855-653-4363 (TTY 800-947-3529)  
Monday–Friday 8 a.m. to 8 p.m.**

NetworkCares is a PPO D-SNP plan with a Medicare contract and a contract with the Wisconsin Medicaid program. Enrollment in Network Health Medicare Advantage Plans depends on contract renewal. Out-of-network/non-contracted providers are under no obligation to treat Network Health members, except in emergency situations. Please call our member experience number or see your Evidence of Coverage for more information, including the cost-sharing that applies to out-of-network services.

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**network health** | **NetworkCares  
(PPO D-SNP)  
Vision Benefits**



# VISION BENEFITS NEVER LOOKED SO GOOD

## NetworkCares members have access to the following.

- Routine vision exam for a \$0 copayment, when performed by an EyeMed in-network provider, one of the nation's largest networks of independent eye doctors and national retail providers
- Access to care when it's convenient for you—with extended weeknight and weekend hours and online appointment scheduling
- The tools and resources that make it easy to use your benefits
  - Enhanced provider search to find the right provider
  - Customer care, day or night

Plus, you'll get up to \$400 annually for contact lenses and/or glasses with a valid prescription.



VISION CARE SERVICES	MEMBER COST
<b>Routine vision exam with dilation as necessary</b>	\$0 copayment in-network or \$40 reimbursement out-of-network
<b>Contact lenses and/or glasses with a valid prescription, including enhancements</b>	\$400 allowance offered in-network or \$400 reimbursement offered out-of-network
<b>Frequency Examination Frame and Lenses Contact Lenses</b>	Once every calendar year Unlimited Unlimited



To find an EyeMed provider, visit [eyedoclocator.eyemedvisioncare.com/network](http://eyedoclocator.eyemedvisioncare.com/network)

## Frequently Asked Questions

### Will I receive an EyeMed ID card?

No. To use your vision benefit, simply show your Network Health ID card to your EyeMed provider. He/she will take care of the rest.

### How do I get the \$400 that's offered for my contacts or glasses?

When you visit an in-network provider, the \$400 is applied towards your purchase of glasses or contacts. Any remaining balance can be used on a future purchase during the calendar year. If you visit an out-of-network provider, you must pay for your eyewear and submit your receipt to EyeMed to receive your reimbursement, up to \$400.

You may also purchase eyewear online by visiting an EyeMed in-network online retailer such as [glasses.com](http://glasses.com) and [contactsdirect.com](http://contactsdirect.com).

### What if I have additional questions about my vision benefit with EyeMed?

To reach EyeMed, call 833-279-4361 (TTY 711). For assistance coordinating your benefits, contact your care manager directly or contact Network Health Care Management at 866-709-0019 (TTY 800-947-3529), Monday–Friday from 8 a.m. to 5 p.m.