



State of Michigan Vision Plan for Employees and Retirees: Fact Sheet

Effective October 1, 2018, EyeMed will be the new insurance carrier for the State Vision Plan. Your vision plan benefits will remain the same. Current Vision Plan and COBRA participants will have coverage from the new network through EyeMed effective October 1st, and new enrollees will have coverage beginning October 7th. When you use a participating provider you will receive savings on a number of items including non-covered items such as polycarbonate lenses, anti-reflective coating, and anti-scratch coating.

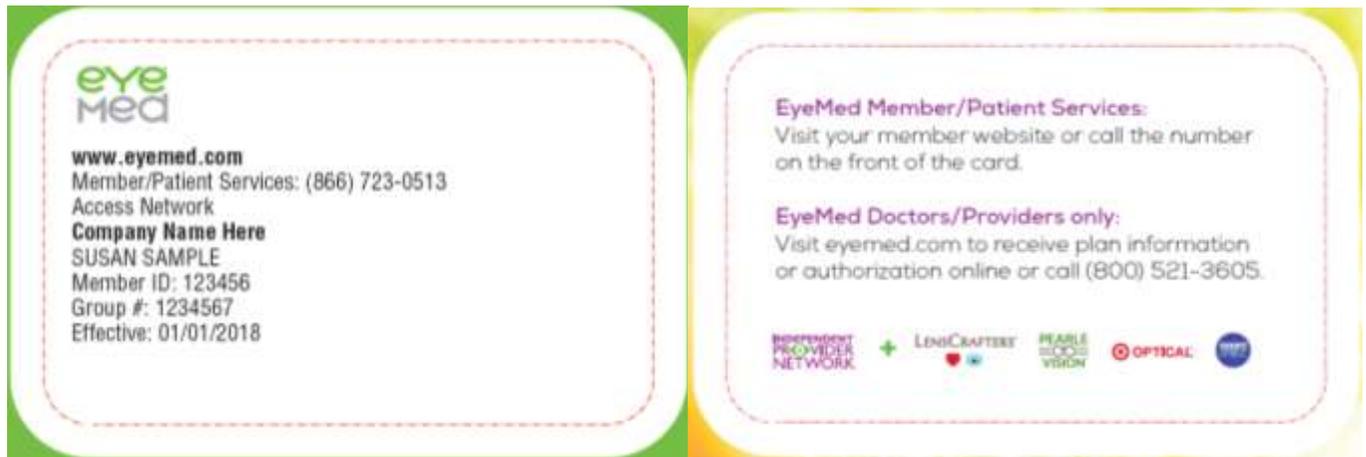
Please see below for answers to frequently asked questions regarding the State Vision Plan.

Will my coverage reset once EyeMed is effective October 1st? (i.e. Allowance of one pair of corrective lenses every 24 months, or once every 12 months if prescription changes.)

No. All of your information will feed over from BCBSM/VSP and be loaded in the EyeMed system. All vision plan benefits will remain the same.

Will I receive a new vision ID card?

Yes. You will receive a new vision ID card from EyeMed before your effective date of October 1, 2018. Here is a sample of what your new ID card will look like:



What number do I call for EyeMed Customer Service?

Members may call EyeMed at **1-833-279-4355**. Hours of operation are:

Monday through Saturday: 7:30 a.m.-11:00 p.m. EST

Sunday: 11:00 a.m.-8:00 p.m. EST

How can I find out which providers participate?

EyeMed offers a [Provider Locator Tool](#) to help employees find a participating provider. Enter your zip

code, leave the “Choose Your Network” drop-down option set to “Access,” and click “Get Results”. You may also contact EyeMed by calling 1-833-279-4355 to find participating providers.

Provider Locator URL: <https://www.eyemedvisioncare.com/member/public/provloc.emvc?networkId=108>

Will my network change?

Yes, your network will change on October 1, 2018. EyeMed’s ACCESS network has more than 100,000 providers nationwide, including more than 5,200 in Michigan. Their network includes both independent providers and national retail chains. Your vision network includes:

- More than 800 independent provider locations
- More than 280 retail chain locations; some participating retail chains include:
 - LensCrafters, Target Optical, Sears Optical, JCPenney Optical, Optical Shop in Meijer, Henry Ford Optimeyes, SVS Vision, and America’s Best

In-network benefits will be applied the same whether you chose to receive services from an independent provider or retail chain. You will receive a welcome kit from EyeMed with two ID cards, but you do not need to have an ID card to receive services. EyeMed providers can verify your eligibility and benefits using your name and date of birth. In addition, you may estimate your out-of-pocket costs by registering on the web site and using EyeMed’s “Know Before You Go” tool.

What if my provider does not participate with the State Vision Plan?

In many cases, your State Vision Plan provides an out-of-network benefit if your provider does not participate. However, you will receive a higher benefit level if you go to an in-network provider.

I cannot find my State Vision Plan ID card. Can I still keep my appointment?

Yes. Your provider can confirm that you are eligible for benefits. Tell your provider that you have benefits through EyeMed with the State of Michigan. The provider can locate you in the EyeMed system by searching for your name and date of birth. You do not need an ID card to receive benefits.

Will my Explanation of Benefits (EOB) change?

Yes. You will be able to access your EOB on EyeMed’s web site following the provider’s claim submission. After 10/1/18, visit www.eyemedvisioncare.com/som and click on the “See My Claims” button within your claims section after you’ve registered and logged in. Click on View your Benefits and then choose “Claim Status” and find the EOB you’d like to view and click “View”.

Home View Claim Status

- > Understanding Your Benefits
- > Benefit Details
- > Locate a Provider
- > Print ID Card
- > **Claim Status**
- > Using Your Benefits Online

Below you will find a listing of all of your claims and their current statuses as well as those of any applicable dependents. If applicable to your plan and an Explanation of Benefits is available for a claim, click on the “View” button in the EOB column next to the claim to view the document. Note: If the EOB column does not appear below EOBs are not applicable to your plan.

Per the U.S. Health Insurance Portability and Accountability Act, subscribers are unable to view benefit and claims information for dependents over the age of 18. Information pertaining to any claims for a dependent where the services were rendered prior to the age of 18 are accessible by the subscriber. Dependents over the age of 18 can create an account on the EyeMed Member web site to access benefit and claims information.

Please note: The majority of EyeMed plans provide up to one year to file claims, meaning most members must submit their claim form within one (1) year from the original date of service. To ensure your claim is filed in a timely manner, please review your employer’s plan information for any claim filing time limits.

Some documents on this page require Adobe® Acrobat® Reader. If you do not have Acrobat Reader, you can [download](#) it for free.

Claim #	Date of Service	Patient	Provider	Status	Group Name	EOB
						View