

Claim submissions made easy

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If you saw an out-of-network eye doctor and you have out-of-network
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CHOOSE AN EYE DOC

With thousands of providers across the nation, you can see who you want to see, when and where you want to see them. Whether it's an independent eye doctor, popular retailer or even online, you have options.

SEE THE GOOD STUFF

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OUT OF NETWORK VISION SERVICES CLAIM FORM

Based from your home or office location, you have the right to obtain in-network level of benefits with an out-of-network provider when: (i) you cannot schedule a visit within two-weeks, (ii) you are unable to locate a participating provider within a 10-mile radius in an **urban-suburban** area, or (iii) you are unable to locate a participating provider within a 20-mile radius in a **rural area**. You must submit a claim form to EyeMed for reimbursement.

Caution, this option is not available when you choose to use an out-of-network provider due to (i) your preference, (ii) when your personal schedule does not permit you to schedule an appointment with an available provider in two-weeks, (iii) or you are outside of your home or office location. Any person who, with intent to defraud or knowing that he or she is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.

Check the boxes that apply. I acknowledge that I fit into one or more of the following criteria:

I was unable to schedule a visit within two-weeks with a participating provider.

Please provide the participating provider's name, location and contact information in which you attempted to (d) Tc2 10089 740(a)



**OUT OF NETWORK
VISION SERVICES CLAIM FORM**