

VisionCare Plan

Frequently Asked Questions

How does the plan work?

The plan is easy to use!

1. Obtain a Benefit Form or Vision Pass from CompBenefits by calling our Member Services Department (number listed below) or from our website at www.compbenefits.com. (Note: You may have to register on your first visit to this site—if so, click on “Register now” and following the instructions.)
2. CompBenefits will send you a personalized Benefit Form that outlines your benefits, along with a list of providers. Then schedule your appointment.
3. Give the Benefit Form to the doctor during your first visit. You’ll pay any copayments at that time as well.

You have nothing more to do! The doctor provides you with services and bills CompBenefits directly for the balance of your bill.

Since the plan is designed to meet your eye care needs, optional upgrades (like frames costing more than the plan limits, progressive lenses, or contacts that are not medically necessary) will cost extra. However, since all upgrades are on a wholesale basis, your costs will be lower than what you would pay on your own.

What are the advantages of using a network provider?

Our national network of providers can provide you with one-stop shopping. You get your eye exam and materials with noting more than your copayment (cosmetic options will include additional charges).

What if I want to see a provider not in your network?

If you prefer, you can visit a non-network doctor. If you do, you will pay the doctor’s regular charges and CompBenefits will reimburse you according to the plan’s non-network benefit schedule.

How can I get further questions answered?

You may contact the CompBenefits Member Services Department with any questions or concerns at 1-800-865-3676, M-F 8am – 6pm EST. Locate us on the web at www.compbenefits.com