



## Your new UMP vision benefits

Vision coverage is provided by UMP, in collaboration with Regence Choice Vision Plan, administered by Vision Service Plan (VSP). When you use your vision benefits, it's clear that eye health is important to you. That's great, because we love eyes and want to help you get the most from your vision coverage. When you visit a VSP Choice network provider, you'll get the personalized eye care you deserve and enjoy a wide selection of featured frame brands. To learn more about what is and is not covered by VSP, check your plan's 2021 certificate of coverage by visiting Forms and publications at hca.wa.gov/ump-coc.

## Your coverage with a VSP Choice network provider

	Adults and dependents ages 19 and over		Dependents under ages 19 Coverage available only with a VSP Choice network provide (out-of-network providers are not covered for any routine vision services)			
Benefit	Description	Сорау	Description	Сорау		
Routine vision exam	<ul> <li>Focuses on your eye health and overall wellness</li> <li>Eligible for one covered preventive eye exam with refraction or visual analysis every calendar year</li> </ul>	\$0 up to the allowed amount	<ul> <li>Focuses on your child's eye health and overall wellness. Tests for childhood vision issues, like nearsightedness, lazy eye, and cross-eye.</li> <li>Eligible for one covered preventive eye exam with refraction or visual analysis every calendar year</li> </ul>	\$0 up to the allowed amount		
Frames	<ul> <li>\$150 allowance for a wide selection of frames</li> <li>\$80 Walmart®/Sam's Club®/Costco® frame allowance</li> <li>Eligible for one frame every two calendar years</li> </ul>	\$0 up to the maximum frame allowance	<ul> <li>Frames are fully covered</li> <li>Eligible for one frame every calendar year</li> </ul>	\$0 up to the allowed amount		
Lenses	<ul> <li>Single vision, lined bifocal, lined trifocal, lenticular, or standard progressive lenses</li> <li>Requires a prescription</li> <li>Eligible for one set of glass or plastic lenses every two calendar years</li> </ul>	\$0 up to the allowed amount	<ul> <li>Single vision, lined bifocal, lined trifocal, lenticular, or standard progressive lenses</li> <li>Eligible for one set of glass or plastic lenses every calendar year</li> </ul>	\$0 up to the allowed amount		
Lens enhancements	<ul> <li>Lens enhancements are not covered for adults over the age of 19.</li> <li>Exception: Impact-resistant coating is covered for dependent children over the age of 19         <ul> <li>Requires a prescription</li> <li>Eligible for covered lenses every two calendar years</li> </ul> </li> </ul>	\$0 up to the allowed amount	<ul> <li>The following lens enhancements are covered:         <ul> <li>Impact-resistant coating</li> <li>Scratch-resistant coating</li> <li>Ultraviolet protection (UV) lenses</li> <li>Eligible for lens enhancements once every calendar year</li> </ul> </li> </ul>	\$0 up to the allowed amount		
Contacts (in lieu of frames and lenses)	<ul> <li>\$150 allowance for elective contacts</li> <li>Contact lens exam (fitting and evaluation)</li> </ul>	\$30 copay	Contact lens exam (fitting and evaluation)	\$0		

es)	•	evaluation) Requires a prescription	\$30 copay	•	Eligible for contacts once every calendar year	
	•	Eligible for contact allowance every two calendar years			Ask your VSP network provider which contacts qualify.	

## Your Coverage with Out-of-Network Providers or Non-US Claims

Get the most out of your benefits and greater savings with VSP network providers (dependents under age 19 do not have out-of-network benefit coverage). Call VSP Member Services for out-of-network plan details and for non-U.S. claims.

Regence BlueShield serves select counties in the state of Washington and is an Independent Licensee of the Blue Cross and Blue Shield Association

and lenses)

Regence BlueShield 1800 Ninth Avenue | Seattle, WA 98101

© 2020 Regence BlueShield





## **Frequently asked questions**

What's new with my vision benefits?	Adults and dependents now have their UMP vision benefits through VSP.			
Any changes for dependents under 19?	No. Dependents under the age of 19 still enjoy the full coverage benefits with a VSP Choice network provider:			
	Comprehensive vision exam;			
	Single vision, lined bifocal, lined trifocal, lenticular lenses, or covered standard progressive lens			
	Fully covered frame; or			
	Elective contact lenses in lieu of prescription glasses.			
Can I see my benefits online?	You can view your benefits by signing in to your Regence account at <u>Regence.com</u> , selecting My Benefits, Vision, then selecting View VSP benefits. If you choose to go to the <u>VSP website at www.vsp.com</u> directly, have your UMP member ID card handy. If you are logging in for the first time, log in with your UMP member ID number (not your SSN). You will need to reference your complete UMP ID Member number from your card (ABC W723456789 00 [dependent suffix code]).			
What about retail?	New this year, adults and dependents over age 19 have the option of receiving network-level benefits from participating retail locations, including Walmart®, Sam's Club®, and Costco®.			
	All participating retail chains provide members the same covered-in-full benefit experience they receive from a VSP provider, with minor exceptions like the frame allowance at Costco®, Walmart®, and Sam's Club®, lens enhancements covered with copay, and value-added benefits. The retail frame allowance at Walmart®, Sam's Club®, and Costco® is \$80 and discounts do not apply. As independent contractors, not all providers at Walmart®, Sam's Club®, and Costco® are contracted as VSP Choice network providers for exam services. Sign into the VSP website at or call Member Services at <b>1</b> (844) 299-3041 prior to seeking exam services to confirm provider participation. Deaf, DeafBlind, Late Deafened, or Hard of Hearing members, call 1-800-428-4833.			
How do I find a network provider?	You can search for a VSP Choice network provider for preventive (routine) vision services through the <u>VSP website at</u> <u>www.vsp.com/eye-doctor</u> . You can also search by signing in to your Regence account at <u>Regence.com</u> , select Find a Doctor, then select Vision, or call VSP Member Services at <b>1 (844) 299-3041</b> . Deaf, DeafBlind, Late Deafened, or Hard of Hearing members, call 1-800-428-4833. <b>Note:</b> Retail providers that may be listed under the adult plan are not network providers for children under the age of 19.			
Can I buy prescription glasses or contacts online from a network provider?	Yes. Adults and all dependents can use your benefits towards prescription glasses and contacts on the Eyeconic® website at eyeconic.com.			
	<ul> <li>Go to the Eyeconic® website at eyeconic.com and log in if you already have an Eyeconic® account.</li> </ul>			
	<ul> <li>To create an account, go to the Eyeconic® website at eyeconic.com and select Use My Insurance.</li> </ul>			
	Choose VSP in the dropdown menu and select Continue			
	Select Sign in with VSP			
	<ul> <li>Enter a VSP username and password, then select Sign On</li> </ul>			
	<ul> <li>Select the name of the person you want to shop for in the drop down, then select Connect</li> </ul>			
	• When you select a product, Eyeconic® shows you how much of the retail price is covered by your vision benefits.			
	<ul> <li>Eyeconic® automatically applies a 20% discount to glasses and sunglasses you purchase even if you choose not to apply your insurance benefit.</li> </ul>			
Do members need an ID card?	As a UMP member with VSP coverage, you have a two-part member ID on your UMP ID card. To learn more about your eligibility, you will need to reference the full ID number, in addition to your member code. For example, the member ID for John Q. Public is: ABC W723456789 00.			
	At your appointment with a VSP Choice network provider, simply tell them you are a UMP member with vision coverage through VSP and share your UMP ID number and subscriber or dependent suffix code. The network provider and VSP will handle the rest.			
Submitting claims for network providers:	There are no claim forms to complete when you see a VSP network provider. Your provider will take care of it for you.			
Submitting claims for out-of-network providers:	<ul> <li>To submit a claim by mail, contact VSP Member Services at 1 (800) 877-7195 to request a VSP Member Reimbursement Form. The form can be sent to a preferred address or emailed to you. You must complete the form and mail it to the address below. Deaf, DeafBlind, Late Deafened, or Hard of Hearing members, call 1-800-428-4833.</li> </ul>			
	<ul> <li>If you see an out-of-network provider, you typically have 12 months to submit a claim.</li> </ul>			
	To submit an Out-Of-Network claim			
	<ul> <li>Be sure your receipts have been scanned and are accessible by your computer</li> </ul>			
	<ul> <li>Log in to your VSP account at <u>www.vsp.com</u></li> </ul>			
	Click on Benefits, then Submit a Claim			
	Click on Start New Claim			
	Follow the prompts to submit your claim			
	Note: There is no out-of-network benefit coverage for dependents under the age of 19.			
Submitting out-of-country claims?	Call VSP Member Services at 1 (916) 635-7373 for services received outside of the United States. Calling from outside the US? Dial exit code of your country (typically 00) plus the country code (1 for USA), then the area code (916), then the seven-digit US local phone number 635-7373. Example: 001-916-635-7373			

Regence complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-888-344-6347 (TTY: 711). 注意:如果您使用繁體中文,您可以免費獲得語言援助服務。請致電 1-888-344-6347 (TTY: 711).

Vision Service Plan (VSP) is a separate and independent company that provides routine vision benefits for Uniform Medical Plan (UMP) members.

UMP-21-015

Regence BlueShield serves select counties in the state of Washington and is an Independent Licensee of the Blue Cross and Blue Shield Association

Regence BlueShield 1800 Ninth Avenue | Seattle, WA 98101

© 2020 Regence BlueShield