

Discover what your vision plan covers and how to get the best value for your needs

United Healthcare

Choose your eyewear — see what's covered

Eye exam

Your plan uses the UnitedHealthcare Vision Network and includes a fully covered exam, subject to a copayment. You'll get the most value from your coverage when you see any provider in this large, national network of optometrists and ophthalmologists, including both local doctors and well-known retail providers. Find a provider at **myuhcvision.com**.

Frame allowance*

When you use a network provider, you can spend a frame allowance to help buy any frame your eye doctor offers. You get a discount on any cost over the allowance amount.

Lens options*

Popular lens options like UV protection or anti-reflective coating are available to you at price-protected amounts. Plus, standard scratch coating and polycarbonate lenses for dependent children are available at no cost.

Additional pairs of glasses*

Receive a 20% discount on additional pairs of eyeglasses, including prescription sunglasses.

Contact lens benefit*

You may have coverage for a fitting and follow-up visits depending on your plan design and lens choice. Sign in to **myuhcvision.com** to learn more about your specific benefit.

Learn more

Get 24/7 access to details about your vision plan – including savings and discounts – and monthly vision health and wellness content by following these steps.

- Sign in to myuhc.com
- Go to Coverage & Benefits
- Scroll down to Vision
- Select View vision plan

Call toll-free: 1-800-638-3120, TTY 711

If you don't have computer access, need language assistance or can't find answers, call us Monday-Friday, 7 a.m.-10 p.m. CT, or Saturday, 8 a.m.-5:30 p.m. CT.



Take steps to protect your eyes and your overall health

Find an eye doctor in the network

When it comes to shopping for eye care, you've got plenty of choices. The UnitedHealthcare Vision Network has over 175,000 access points for care nationally, from local doctors around the corner to well-known retail chains or specialty online retailers.*

Sign in to myuhcvision.com to search by provider name, specialty or location.

2 Schedule your eye exam

Regular visits to an eye doctor can help keep your eyes healthy and improve your overall health.

Get a complete eye exam

A dilated exam lets your doctor look inside your eye and check your eye health. The exam can also show early signs of conditions like diabetes or high blood pressure, even before other parts of your body are affected. At your appointment, be sure to:

- Tell your doctor you have a UnitedHealthcare Vision plan
- Give your name and date of birth

You don't need your ID card to use your benefits. If you want an ID card, you can print it from your computer or save it to your mobile device at myuhcvision.com.

Discover more ways to save at myuhcvision.com

Everyday eyewear

Get 10% off contact lenses and free shipping on orders of \$99 or more. Shop for a wide variety of eyeglasses and sunglasses, try on new frame styles using the virtual mirror, find popular lenses and coatings - some available at no additional cost – and access 24/7 customer support. Visit uhcglasses.com to get started.

Laser vision correction

Save up to 35% off the national average price of laser vision correction at more than 800 QualSight® LASIK locations nationwide.**

Blue-light screen protectors

Save up to 30% off blue-light screen protectors for select smartphones, tablets and laptops.

BenefitHub access

Find over 200 discounts and rewards for nutrition, memberships, electronics, restaurants, travel and more.

Hearing aids

Get preferred pricing on custom-programmed hearing aids, starting at \$699 each, through UnitedHealthcare Hearing.

Network retail locations include:

1800 contacts



























WARBY PARKER

^{*}Not all providers participate in all plans. Check with your provider before using your benefits. Network snapshot report (internal report), December 2024.

^{**}Network location count as of October 2023.

^{***}For virtual prescription renewal only. ExpressExam may not be available for all vision plans and is not in all states.

We do not treat members differently because of sex, age, race, color, disability or national origin.

If you think you weren't treated fairly because of your sex, age, race, color, disability or national origin, you can send a complaint to the Civil Rights Coordinator:

Mail: UnitedHealthcare Civil Rights Grievance P.O. Box 30608, Salt Lake City, UT 84130

Online: UHC_Civil_Rights@uhc.com

You must send the complaint within 60 days of when you found out about it. A decision will be sent to you within 30 days. If you disagree with the decision, you have 15 days to ask us to look at it again. If you need help with your complaint, please call the toll-free member phone number listed on your ID card.

You can also file a complaint with the U.S. Dept. of Health and Human Services:

Online: https://ocrportal.hhs.gov/ocr/portal/lobby.jsf. Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html.

Phone: Toll-free 1-800-368-1019, 1-800-537-7697 (TDD)

Mail: U.S. Dept. of Health and Human Services, 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201

We provide free services to help you communicate with us such as letters in other languages or large print. You can also ask for an interpreter. To ask for help, please call the toll-free member phone number listed on your health plan ID card.

ATTENTION: If you speak **English**, language assistance services, free of charge, are available to you. Please call the toll-free phone number listed on your identification card

ATENCIÓN: Si habla **español (Spanish)**, hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al número de teléfono gratuito que aparece en su tarjeta de identificación.

請注意:如果您說**中文 (Chinese)**,我們免費為您提供語言協助服務。 請撥打會員卡所列的免付費會員電話號碼。

XIN LƯU Ý: Nếu quý vị nói tiếng **Việt (Vietnamese)**, quý vị sẽ được cung cấp dịch vụ trợ giúp về ngôn ngữ miễn phí. Vui lòng gọi số điện thoại miễn phí ở mặt sau thẻ hội viên của quý vị.

알림: 한국어**(Korean)**를 사용하시는 경우 언어 지원 서비스를 무료로 이용하실 수 있습니다. 귀하의 신분증 카드에 기재된 무료 회원 전화번호로 문의하십시오.

PAALALA: Kung nagsasalita ka ng **Tagalog (Tagalog)**, may makukuha kang mga libreng serbisyo ng tulong sa wika. Pakitawagan ang toll-free na numero ng telepono na nasa iyong identification card.

ВНИМАНИЕ: бесплатные услуги перевода доступны для людей, чей родной язык является русском (Russian). Позвоните по бесплатному номеру телефона, указанному на вашей идентификационной карте.

ةي و غُللا قدع السملا تامدخ ن إف ،(Arabic) ةي بعر على الشدحت سنك اذا : وي بنت قواطب ى لع جردمل الين اجمل افت امل مقرب ل اصت الى العجر أي لكل قحاسم قين اجمل العب قص اخل المي عمل ا ATANSYON: Si w pale **Kreyòl ayisyen (Haitian Creole)**, ou kapab benefisye sèvis ki gratis pou ede w nan lang pa w. Tanpri rele nimewo gratis ki sou kat idantifikasyon w.

ATTENTION: Si vous parlez **français (French)**, des services d'aide linguistique vous sont proposés gratuitement. Veuillez appeler le numéro de téléphone gratuit figurant sur votre carte d'identification.

UWAGA: Jeżeli mówisz po **polsku (Polish)**, udostępniliśmy darmowe usługi tłumacza. Prosimy zadzwonić pod bezpłatny numer telefonu podany na karcie identyfikacyjnej.

ATENÇÃO: Se você fala **português (Portuguese)**, contate o serviço de assistência de idiomas gratuito. Ligue gratuitamente para o número encontrado no seu cartão de identificação.

ATTENZIONE: in caso la lingua parlata sia **l'italiano** (**Italian**), sono disponibili servizi di assistenza linguistica gratuiti. Per favore chiamate il numero di telefono verde indicato sulla vostra tessera identificativa.

ACHTUNG: Falls Sie **Deutsch (German)** sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Bitte rufen Sie die gebührenfreie Rufnummer auf der Rückseite Ihres Mitgliedsausweises an.

注意事項:日本語 (Japanese) を話される場合、無料の言語支援サービスをご利用いただけます。健康保険証に記載されているフリーダイヤルにお電話ください。

رد ناگیار روط مب ین ابنر دادم ا تامدخ ، نسما (Farsi) یس راف امش نابیز رگا : وجوت یی اس انش سر اک ی ور مک ین اگیار ن ف لت مرامش اب اف طل دش اب یم امش ر ای ت خا . دیری گب س امت مدش دی ق امش

ध्यान दें: यदि आप **हिंदी (Hindi)** बोलते है, आपको भाषा सहायता सेबाएं, नि:शुल्क उपलब्ध हैं। कृपया अपने पहचान पत्र पर सूचीबद्ध टोल-फ्री फोन नंबर पर कॉल करें।

CEEB TOOM: Yog koj hais Lus **Hmoob (Hmong)**, muaj kev pab txhais lus pub dawb rau koj. Thov hu rau tus xov tooj hu deb dawb uas teev muaj nyob rau ntawm koj daim yuaj cim qhia tus kheej.

ចំណាប់អារមុមណ៍: បើស៊ីនអុនកន្ទីយ៉ាយភាសាខុមរំ (Khmer) សជាជំនួយ ភាសាដ**ោយឥតគិតថល់ គឺមានសំរាប់អុនក។ សូមទូរស័ពទទ**ៅលខេ ឥតគិតថុល់ ដំលេមាន់ន**ៅល**ើអតុដស់ញញាណបំណុណរបស់អុនក។

PAKDAAR: Nu saritaem ti **Ilocano (Ilocano)**, ti serbisyo para ti baddang ti lengguahe nga awanan bayadna, ket sidadaan para kenyam. Maidawat nga awagan iti toll-free a numero ti telepono nga nakalista ayan iti identification card mo.

DÍÍ BAA'ÁKONÍNÍZIN: **Diné (Navajo)** bizaad bee yániłti'go, saad bee áka'anída'awo'ígíí, t'áá jíík'eh, bee ná'ahóót'i'. T'áá shoodí ninaaltsoos nitl'izí bee nééhozinígíí bine'déé' t'áá jíík'ehgo béésh bee hane'í biká'ígíí bee hodíilnih.

OGOW: Haddii aad ku hadasho **Soomaali (Somali)**, adeegyada taageerada luqadda, oo bilaash ah, ayaad heli kartaa. Fadlan wac lambarka telefonka khadka bilaashka ee ku yaalla kaarkaaga aqoonsiga.

Learn more

Visit **myuhcvision.com** or call **1-800-638-3120**, TTY **711**. ¿Habla español? Podemos ayudar.



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This policy has exclusions, limitations and terms under which the policy may be continued in force or discontinued. For costs and complete details of coverage, contact UnitedHealthcare Insurance Company.

The examples provided are for general knowledge purposes only and should not be interpreted as a preference or recommendation of any particular provider, brand or company. We encourage members to choose providers based on their individual needs and preferences.

UnitedHealthcare vision coverage provided by or through UnitedHealthcare Insurance Company, located in Hartford, Connecticut, UnitedHealthcare Insurance Company of New York, located in Islandia, New York, or their affiliates. Administrative services provided by Spectera, Inc., United HealthCare Services, Inc. or their affiliates. Plans sold in Texas use policy form number VPOL.06.TX, VPOL.13.TX or VPOL.18.TX and associated COC form number VCOC.18.TX. Plans sold in Virginia use policy form number VPOL.06.VA, VPOL.13.VA or VPOL.13

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