

2021 overview of vision care for members covered by a Federally Qualified Health Plan (FQHP)

All of the policies have the same coverage, but member liabilities vary.

Members have a FQHP plan purchased directly through Blue Cross and Blue Shield of Vermont (BCBSVT) or through Vermont Health Connect. Vermont Health Connect members will have a prefix of ZII (individual) or ZIG (employer group).

Pediatric routine vision care— see the information below from the member certificate of coverage that defines eligibility and eligible services. This is only available to members up to 21 years of age (and through the end of the plan year in which they turn 21) and administered by Vision Service Plan (VSP). Services and materials must be supplied by VSP Network Providers. All claims are to be submitted to VSP.

If the member has a copayment, a separate copayment will be taken on vision care and materials. For example, if a member has a \$20 copayment and they have a routine vision check and purchase contact lenses, their total copayment will be \$40.

Adult routine vision care - there are no benefits for adult (age 22 or older) routine vision exam or materials.

However, *VSP Vision Savings Pass* discounts do apply and are administered by VSP. Members may check with their providers to determine if they are eligible for any discounts through their office. Providers with questions should contact VSP directly.

Medical vision care — eligibility defined by BCBSVT vision policy, located on our provider website at www.bcbsvt.com. These benefits are available to everyone, regardless of age. BCBSVT administers the benefits. All claims are to be submitted to BCBSVT.

