

EyeMed Member: Frequently Asked Questions



Q. How do I use my EyeMed Vision benefit?

A. Using the EyeMed benefit at a network provider is easy:

1. Locate a provider that services your plan by logging into our member site area, calling our Customer Care Center or referring to your member welcome packet.
2. Schedule an appointment – don't forget to let the office staff know you have EyeMed.
3. Show your ID card at the time of your appointment

The provider's staff will do the rest! You will only pay for any copays indicated, as well as any applicable amounts over the allowances. Your provider will provide you with these amounts.

The process varies slightly if you decide to use a non-network provider. Review the [EyeMed Vision Plan](#) from your Benefit Guide for more information

Q. Do I need to file a claim?

A. No, you will not file claims if you use an in-network provider. If your plan offers out-of-network benefits and you decide to go to an eye care provider not on EyeMed's panel, you will need to use an out-of-network claim form.

Q. Where can I find an out-of-network claim form?

A. Some plans have custom out-of-network claim forms, which can be obtained by [logging into the secure member site](#). You may also go to Pinellas County Schools website under Human Resources, Risk/Benefits, Vision. Not all plans include out-of-network reimbursements, and discount plans are valid only at EyeMed network provider locations. **Please log in to our member site to view your plan details and confirm out-of-network availability prior to receiving services from a non-network provider.** [EyeMed Out-of-Network Claim Form](#)

Q. Can I view my benefits online?

A. Yes. When you register on the [EyeMed Web site](#), you can view your plan benefits and eligibility status

Q. How do I request additional ID cards?

A. If you need more ID cards, you can request one by registering or logging into their [member portal](#), or call our Customer Care Center at 866-9EYEMED

Q. Can I apply FSA funds to out-of-pocket costs after my EyeMed benefit is applied?

A. Yes. You can use your Flexible Spending Account (FSA) to pay for a variety of health-related out-of-pocket expenses, including those associated with ancillary benefits like an EyeMed plan. Money from the FSA can be applied toward the eye exam copay, out-of-pocket costs for prescription glasses or contact lenses (including upgrades) and supplies such as contact lens solution. Employees can even use FSA funds for LASIK surgery.

Q. Do I need my ID card in order to use my benefit or discount?

A. No, you do not need your ID card in order to use your EyeMed plan. If you have your card, we recommend you take it with you, as it helps the provider correctly apply your discount or benefit. However, if you don't have a card, simply let the provider office staff know that you are an EyeMed member, and they can verify your plan details and eligibility for you. To request a replacement ID card, you can log in to the secure member area of our site and order a new one.

Q. How do I find a provider who accepts my EyeMed plan?

A. You can find a provider by using our online Provider Locator or through the following methods:

- Refer to the Member Brochure you received upon enrolling in the program. It includes a list of providers near your home.
- Call the Customer Care Center at 866-9EYEMED to use our automated voice response system or speak with a representative.
- Ask your preferred eye care provider if he or she accepts EyeMed.