



First Nations Health Authority
Health through wellness

FIRST NATIONS HEALTH BENEFITS

Vision Care

CHANGES ARE COMING IN THE SUMMER OF 2019. VISIT www.fnha.ca/benefits FOR MORE INFORMATION.

First Nations Health Benefits (FNHB) provides coverage for eye exams and glasses to ensure clients maintain good eye health. Eye exams are important to check the eyes for common diseases and as an indicator of overall health. Regardless of age or physical health, a comprehensive eye exam will help detect any eye problems early when they are most treatable.

What is covered?

FNHB provides some coverage for the following items:

- ✓ Eye examinations
- ✓ Glasses (lenses and frames)

Please note that the BC optometrists can bill eye exams to the BC Medical Services Plan (MSP) for children under the age of 19 and adults 65 and over. Providers may choose to charge more than what MSP covers. Extra charges are not covered by FNHB. Coverage is subject to frequency limits. Extra charges for eye exams and eyewear are the responsibility of the client. Items and services not listed as a benefit may be covered on an exceptional basis. For a full description of the vision care benefit, please visit www.fnha.ca/benefits

Exclusions

Examples of vision care items and services that are not covered include:

- Cataract surgery
- Items for aesthetic purposes
- Progressive or trifocal lenses
- Refractive laser surgery (e.g. Lasik)
- Two pairs of glasses, except in specific scenarios when bifocals are needed
- Photochromatic lenses (e.g. Transitions lenses)

Working with providers

Providers must be registered with FNHB to directly bill for services. Clients who see a vision care provider not registered with FNHB will need to pay up front and submit a reimbursement request to FNHB. Vision care benefits must be provided by an ophthalmologist, optometrist, or optician. Clients are strongly encouraged to discuss billing with their provider before booking an appointment.

Some questions to ask your provider about billing:

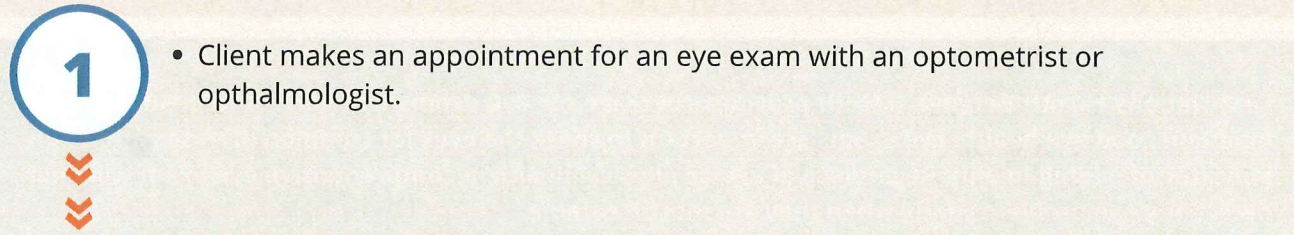
- Are you registered with FNHB for direct billing?
- Do you require payment up front for services?
- Do you charge above the amount covered by FNHB?

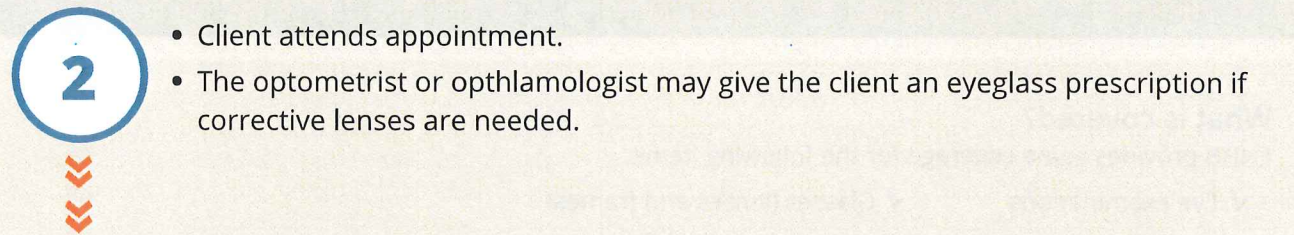
If you have any questions about the Vision Care benefit, contact Health Benefits at:

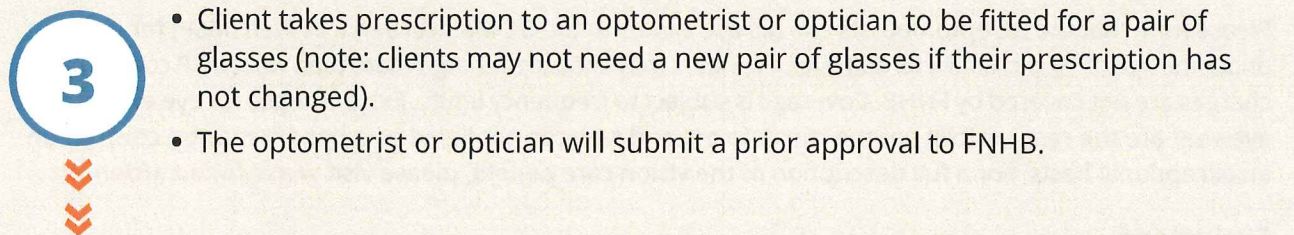
1-855-550-5454 (toll-free)

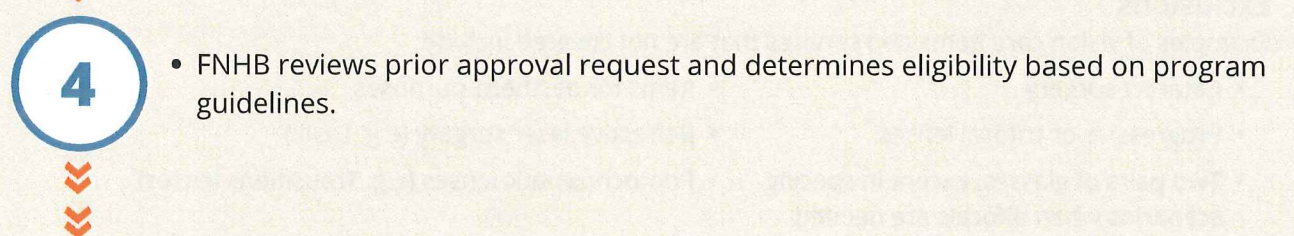
Accessing Vision Care Benefits

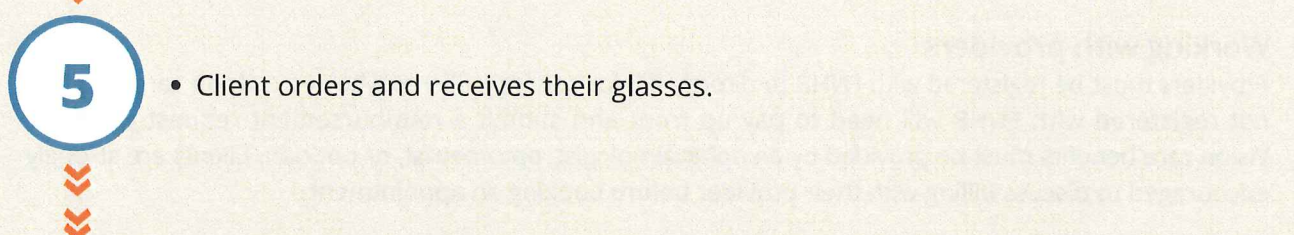
FEBRUARY 2019

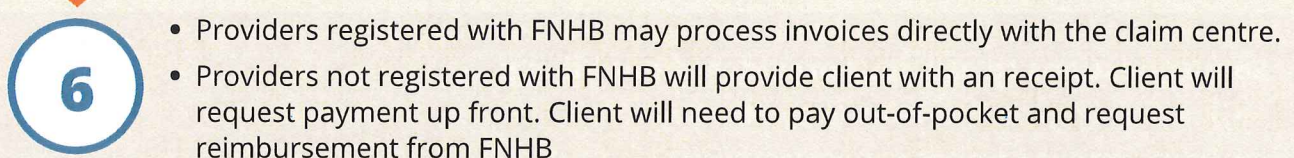
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1 • Client makes an appointment for an eye exam with an optometrist or ophthalmologist.
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2 • Client attends appointment.
• The optometrist or ophthalmologist may give the client an eyeglass prescription if corrective lenses are needed.
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3 • Client takes prescription to an optometrist or optician to be fitted for a pair of glasses (note: clients may not need a new pair of glasses if their prescription has not changed).
• The optometrist or optician will submit a prior approval to FNHB.
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4 • FNHB reviews prior approval request and determines eligibility based on program guidelines.
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5 • Client orders and receives their glasses.
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6 • Providers registered with FNHB may process invoices directly with the claim centre.
• Providers not registered with FNHB will provide client with an receipt. Client will request payment up front. Client will need to pay out-of-pocket and request reimbursement from FNHB

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