



First Nations Health Authority
Health through wellness

FIRST NATIONS HEALTH BENEFITS

Vision Care

First Nations Health Benefits (Health Benefits) provides coverage for eye exams and glasses to ensure clients maintain good eye health. The vision care benefit is administered through a partnership between Health Benefits and Pacific Blue Cross (PBC). 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?

Health Benefits covers items and services under the following categories:

- ✓ Eyewear and Repairs
- ✓ Tests and Exams

Optometrists can bill eye exams to the BC Medical Services Plan (MSP) for children 18 and younger and adults 65 and over. Providers may choose to charge more than what MSP covers, in which case Health Benefits may cover some of the remaining cost.

Health Benefits offers coverage for eyewear and exams according to the following rates:

For clients 18 and younger:	For clients 19 and older:
• \$100 every year for exams	• \$100 every two years for exams
• \$275 every year for standard eyewear	• \$275 every two years for standard eyewear

Clients can access detailed information about their vision care benefits through the online PBC Member Profile at www.pac.bluecross.ca or by calling Health Benefits at **1.855.550.5454**. Items and services not listed as a benefit may be covered on an exceptional basis. Call Health Benefits to learn more about exception requests.

Exclusions

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

- Items that support the use of prescription eyewear (e.g., contact lens solution, glasses cases)
- Industrial safety frames or lenses
- Non-prescription items
- Surgical procedures (e.g., laser eye surgery)
- Vision training

Working with providers

Most vision care providers in BC are registered with PBC and can directly bill for items and services. Clients who see a provider who is not registered with PBC will need to pay out-of-pocket and submit a reimbursement request to PBC after their appointment. Vision care benefits must be provided by a licensed 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 PBC for direct billing or do I have to pay out-of-pocket?
- Do you require payment up front for services (e.g., before treatment)?
- Do you charge above the amount covered by Health Benefits?

Accessing Vision Care Benefits

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1

- Client makes appointment for eye exam.
- Client confirms that provider can directly bill PBC.
- Client learns about any out-of-pocket charges before the exam.

2

- Client attends appointment.
- Provider may give the client a corrective eyewear prescription if needed.

3

- Client uses the prescription to buy new eyewear, if needed.

4

- Providers registered with PBC submit invoices directly to PBC.
- Providers not registered with PBC will provide client with an invoice. Client will need to pay out-of-pocket and request reimbursement from PBC.