



Vision Health: *Included Benefit*

Be kind to your eyes.

Sight provides much pleasure, but it's also an important part of staying safe and independent. Your eyes deserve good care and attention. Good news! Your Care N' Care plan includes vision benefits to keep your eyes young and healthy.

- Benefits provided by EyeMed.
- Refraction test included during routine eye exam. No additional cost.
- In-network and out-of-network coverage.
- Locate an in-network vision provider on the Care N' Care website by using the "Find a Provider" search, cnchealthplan.com/find-a-provider/, Select "Find a Vision Provider" to access the LARGE network of vision providers.

Use the chart and information below to determine your copay based on the plan you are enrolled in and what your reimbursed amount will be depending on the service.



Plan Name	Routine Eye Exam		Glasses, Lenses Frames, and Contacts	
	In-Network	Out-of-Network	In-Network	Out-of-Network
Care N' Care Choice (PPO)	\$0 copay	\$50 Copay ¹	\$0 copay ²	\$30 copay
Care N' Care Choice Plus (PPO)	\$0 copay	\$40 copay ¹	\$0 copay ²	\$30 copay
Care N' Care Choice Premium (PPO)	\$0 copay	\$35 Copay ¹	\$0 copay ³	\$30 copay
Care N' Care Choice MA-Only (PPO)	\$0 copay	\$35 Copay ¹	\$0 copay ³	\$30 copay

Have Questions or Need Assistance? Contact your Customer Experience Team.



1-877-374-7993 (TTY 711) October 1 - March 31, 8am to 8pm, CST, seven days a week or April 1 - September 30, 8am to 8pm, CST, Monday through Friday.



YourTeam@cnchealthplan.com

¹You will be reimbursed up to a maximum amount of \$30 for a routine eye exam with submission of paid receipt and completed reimbursement form.

²With a maximum benefit amount of \$100. ³With a maximum benefit amount of \$150. All vision benefits provided by EyeMed. Care N' Care Insurance is an HMO and PPO plan with a Medicare contract. Y0107_H6328_22_124_M