Archdiocese of St. Louis

PMBS COVERAGE FOR VISION SERVICES

OVERVIEW	PRIESTS UNDER AGE 65
Yearly Eye Examinations (Routine Only) Network Providers: $0 Copay per visit Non-Network Providers: $50 Copay per visit	Expenses for one (1) routine eye exam performed by an Ophthalmologist or Optometrist. **Claims for eye examinations are submitted to United Healthcare (UHC) for processing.** Provide UHC ID card to the provider to ensure accurate claims processing. Inform the provider that the claim is paid under the medical plan, (not a separate vision plan), and to submit the claim to the address listed on the back of the UHC medical ID card.
Prescription Eyewear, including eyeglasses, contact lenses and eye exam (when not covered by Medicare)	Effective January 1, 2021: $300 benefit maximum toward the purchase of eyeglasses (lenses and frames) and/or contact lenses during two (2) Rolling Years. **Priests must present an invoice and proof of payment to the PMBS office for reimbursement, or the provider may submit an invoice to PMBS.**
OVERVIEW	**PRIESTS IN MEDICARE ADVANTAGE PLAN**
Yearly Eye Examinations	**How often is it covered?** Expenses for one (1) routine eye exam every 12 months. Provider to submit claims to United Healthcare Medicare Advantage for processing. **NOTE**: Special rules apply in case of cataract surgery.
Prescription Eyewear, including eyeglasses, contact lenses and eye exam (when not covered by Medicare)	Effective January 1, 2021: $300 benefit maximum toward the purchase of eyeglasses (lenses and frames) and/or contact lenses during two (2) Rolling Years. ("Rolling years" means that two years must elapse before you are eligible for the benefit again.) **Priests must present an invoice and proof of payment to the PMBS office for reimbursement, or the provider may submit an invoice to PMBS.**