

MEMBER FAQS

HOW DO I ENROLL?

Enrollment procedures vary by group but usually involve submitting a form as a new employee, during the Open Enrollment period or in the case of a qualifying event. Please contact your benefits administrator to determine your appropriate process for enrollment and to access the proper paperwork.

IS MY FAMILY COVERED?

You can check your family's eligibility by logging into your member account. You can also add (or drop) dependents to your plan during the Open Enrollment period or in the case of a qualifying event.

WHEN DOES MY COVERAGE END?

Your coverage ends when you terminate it through your benefit administrator or when you leave the organization.

HOW DO I ACCESS INFORMATION ONLINE?

Go to davisvision.com, click on "Member" and enter your username and password. First time users will have to register their account by creating a username and password. You can also access information through our mobile app once registered.

WHAT ARE YOUR HOURS OF OPERATION?

Our customer care center is open 7 days/week at convenient times for all areas of the country. The operating hours are:

EST

MON-FRI 8 a.m. – 11 p.m.

SAT 9 a.m. – 4 p.m.

SUN 12 p.m. – 4 p.m.

CST

MON-FRI 7 a.m. – 10 p.m.

SAT 8 a.m. – 3 p.m.

SUN 11 a.m. – 3 p.m.

MST

MON-FRI 6 a.m. – 9 p.m.

SAT 7 a.m. – 2 p.m.

SUN 10 a.m. – 2 p.m.

PST

MON-FRI 5 a.m. – 8 p.m.

SAT 6 a.m. – 1 p.m.

SUN 9 a.m. – 1 p.m.

WHAT INFORMATION WILL MY EYE DOCTOR NEED?

When scheduling your appointment with an in-network provider, it's best to have your member number so they can quickly verify eligibility. However, you can also use the policy holder's first/last name and the state in which they live.

WHERE DO I FIND MY MEMBER NUMBER?

Your member number can be found on your Member ID Card, by logging in to your account, or by calling us at 1 (800) 283-9374.

DO I GET A MEMBER ID CARD? WHAT IF I LOSE IT?

Typically, the primary policy holder receives a Member ID Card; covered dependents do not. However, you do not need the ID card to use your benefits. Replacement cards can be ordered through your online member account or by calling us.

WHAT IF MY PROVIDER IS NOT IN-NETWORK?

Most plans include an out-of-network (OON) option that allows members to receive partial reimbursement for services received from providers who don't participate in our network. Log in to your account, and click on "Access Benefits and Forms" to download the Direct Reimbursement Claim Form. Follow the instructions on the form to submit your claim. You must include either your provider's signature or a detailed receipt. You can request to add a provider to your network under "Find a Provider" in your member account.

TIP! Bring the Direct Reimbursement Claim form with you to your appointment for easy completion of provider information and for provider's signature.

Additionally, members with out-of-network benefits can also submit a claim using our mobile app. Simply log in to the mobile app, fill in all relevant expenses and take a photo of your receipt. After submitting, you can even track the progress of your out-of-network claim.

WHAT IS INCLUDED IN AN EYE EXAMINATION?

An eye exam takes roughly an hour and consists of a variety of checkups which include a health review, simple visual acuity tests, refraction test, visual field test, glaucoma test, slitlamp evaluation and dilation. A comprehensive eye health exam can detect a number of eye diseases, as well as signs of systemic conditions such as diabetes, thyroid disease, high blood pressure and neurological impairments. Every eye exam our providers administer is consistent with clinical guidelines published by the Eye American Optometric Association and the American Academy of Ophthalmology.

WHAT IS A DILATED RETINAL EXAM?

A Dilated Retinal Examination (DRE) is a critical diagnostic procedure in the detection and management of diabetes, glaucoma, hypertension and many other ocular and/or systemic diseases (up to 30 altogether!). It can lead to higher quality patient care, improved lifestyle through early detection and intervention, and possibly lower your overall health care costs.

WHAT OPTIONS DO I HAVE FOR LASER VISION CORRECTION SERVICES?

As a Davis Vision member, you receive the lowest prices on LASIK procedures guaranteed – Under \$1,000/eye for Conventional LASIK (usually \$1,677/eye). Plus, you are eligible for a free LASIK consultation at any of our 900+ locations nationwide. Visit lasik.qualsight.com for more details or call 1-855-502-2020 to schedule your free consultation.

WHAT IS THE EXCLUSIVE COLLECTION?

The Exclusive Collection is a unique offering to Davis Vision members only and can be found in nearly 9,000 provider offices across the country. Just log in to your online member account, click on “Find a Provider” and look for the glasses icon.

FRAMES: A collection of over 200 frames valued at up to \$195 but available to members for no more than \$40 out-of-pocket, usually nothing. To browse frames, log in to your online member account and click “Personal Frame Collection.”

CONTACTS: A collection of popular contact lens products that are dispensed according to your specific plan design. Contact lenses from our Exclusive Collection, along with your evaluation, fitting and follow-up care, are fully-covered with your Davis Vision plan.

DO I HAVE TO GET ALL SERVICES COMPLETED AT THE SAME TIME?

As a Davis Vision member, you can get an eye exam and shop for eyewear at different times and in different locations. For example, you may get your eye exam from an eye care provider and then use your prescription to shop for glasses at an in-network retailer at a later date within the same plan year.

DOES MY WHOLE FAMILY HAVE TO VISIT THE SAME PROVIDER?

No! Plan dependents can visit different providers. For example, students who are away at school can locate a participating provider near them.

CAN I GET BOTH GLASSES AND CONTACT LENSES?

Typically, your plan benefits will cover eyeglasses or contact lenses, but not both. We are however, able to offer our members additional discounts on certain eyewear and eye care purchases even after the plan allowances have been used. Log in to your member account online or using the mobile app to view plan details. If you still have questions, call us at 1 (800) 999-5431.

WHAT IF MY GLASSES BREAK?

All frames purchased in-network and crafted in our labs come with a 1-year breakage warranty. So, if your glasses break, simply return them to where you purchased them – we’ve got you covered.

CAN I USE MY INSURANCE WHEN SHOPPING ONLINE?

All online purchases for glasses or contacts are currently considered out-of-network.

WHAT IS YOUR POSITION ON TELEHEALTH SERVICES?

Davis Vision/Superior Vision support telehealth services to improve access and quality of care while reducing costs. [Click here to read the position statement.](#)