To Locate a provider before you enroll

Visit www.avesis.com
Click on ‘Vision’ (located on left side of home page)
Click on ‘Search Our Providers’ (middle of page)
> Click on Zip Code
> Click Cancel
> Enter Zip Code
> Enter Mile Radius
> Click Go

To Locate a provider, verify eligibility, print an ID card or benefit summary after you are enrolled

Visit www.avesis.com
Click on ‘Vision’ (located on the left side of home page)
Click on ‘Members’
Member Login
> type in ID number or SSN #
> type in last name
> enter
You may select the desired options
> Verify Eligibility
> Print ID Card
> Print Benefit Summary
> Search for a Provider

What types of lenses are covered?
With your Avesis Advantage Vision Program you can receive standard single vision, standard lined bifocal and standard lined trifocal lenses covered at 100% after paying any applicable copayment amounts.

What are “standard” lenses?
Standard lenses are lined, glass or plastic, bifocal or trifocal lenses.

What types of lenses are not considered “standard”?
Lenses that are not considered “standard” would include specialty lenses such as polycarbonate, Hi-index, etc.

How are non-standard (“specialty”) lenses covered?
When selecting specialty lenses such as those described above, the provider will discount the usual and customary fee by 20%. The balance will then be reduced by the Avesis plan payment for the type of lens prescribed (i.e. single vision or bifocal). Any balance due is your responsibility.

What are progressive lenses and how are they covered?
Progressive lenses are multi-focal lenses that do not have a line, circle or shape visible in the lens. Your out of pocket expense is limited to the retail price of the lenses less 20%, minus the Avesis payment to the provider of $50.00.

What frames are covered?
You may select from any frame in the provider’s office. If the price of the frame is within the plan allowance you have no out of pocket cost.

What happens if the price of the frame chosen exceeds the plan allowance?
If the price of the frame selected exceeds the plan allowance, the provider will calculate the amount due based upon the formula provided in the Provider Agreement. The amount due will be reduced by your plan allowance.
Remember, at most provider locations, plan allowance is based on the wholesale price of the frame. In those locations where it is not based on wholesale, the formula used to calculate your out of pocket cost results in a comparable price to you.

If the provider’s office is running a special is there a way to still use my Avesis benefits?
If the provider’s office is having a sale and you want to purchase your glasses or contact lenses using the special and not your benefits you can still submit the itemized paid receipt to Avesis. You will be reimbursed based upon the out of network reimbursement schedule.

How do I get reimbursed for an out-of-network claim?
Simply mail us the following information: Your Name, Address, Phone Number, Social Security Number, Date of Service, Provider’s Name, and an Itemized Receipt. If you prefer, you can print the Avesis Vision Benefits Claim Form (in PDF format) from the Avesis website. Mail the completed claim form to:
Avesis Third Party Administrators, Inc.
Vision Claims Department
P.O. Box 7777
Phoenix, Arizona 85011-7777.