

Connect to a world of vision care

Visit the **myuhcvision.com** website to:

- · Check when you're eligible for benefits
- · Learn how your vision plan works
- · See your copay amounts
- Print your ID card, if you prefer (ID cards are optional)
- Find a network eye doctor to get the most out of your vision benefits
- Choose from local doctors around the corner to well-known retail chains or specialty online retailers

- View claim status
- · Find answers to frequently asked questions
- Get discounts on laser vision correction, extra contact lenses and eyeglasses, blue-light-blocking screen filters and more
- Access monthly vision health and wellness content to help understand the value of your vision plan



Learn more

Visit **myuhcvision.com**. First-time users, have your Vision Subscriber ID or the last 4 digits of your Social Security number ready.



The company does not discriminate on the basis of race, color, national origin, sex, age or disability in health programs and activities. We provide free services to help you communicate with us, such as letters in other languages or large print. Or, you can ask for an interpreter. To ask for help, please call 1-800-638-3120, TTY 711, Monday through Friday, 7 a.m. to 10 p.m. CT.

ATENCIÓN: Si habla español (Spanish), hay servicios de asistencia de idiomas, sin cargo, a su disposición. Llame al 1-800-638-3120, TTY 711. 請注意:如果您說中文 (Chinese), 我們免費為您提供語言協助服務。請致電: 1-800-638-3120, TTY 711

UnitedHealthcare vision coverage provided by or through UnitedHealthcare Insurance Company, located in Hartford, Connecticut, UnitedHealthcare Insurance Company of New York, located in Islandia, New York, or their affiliates. Administrative services provided by Spectera, Inc., United HealthCare Services, Inc. or their affiliates. Plans sold in Texas use policy form number VPOL.06.TX, VPOL.13.TX or VPOL.18.TX and associated COC form number VPOL.06.TX, VCOC.CER.13.TX or VCOC.18.TX. Plans sold in Virginia use policy form number VPOL.06.VA, VPOL.13.VA or VPOL.18.VA and associated COC form number VCOC. INT.06.TX, VCOC.CER.13.TX or VCOC.18.TX. imitations and terms under which the policy may be continued in force or discontinued. For costs and complete details of the coverage, contact either your broker or the company.