
INTEGRATING PREVENTIVE EYE CARE INTO MEDICAL BENEFIT PLANS: Considerations for Benefit Managers

More than 70% of large employers say they are considering or actively pursuing the integration of preventive eye care into their primary medical benefit plans in the next five years. Providing integrated preventive eye health coverage not only shows that your company cares about its employees' overall health and well-being, but also makes financial sense. As you evaluate your plan's design and seek out ways to add value and quality through integration, there are a few important considerations that plan designers and benefit managers should keep in mind:

Don't Exclude Annual Dilated Eye Exams from the Medical Plan

Most medical plans provide coverage for diagnosed conditions of the eye, like glaucoma or cataracts, but they do not provide coverage for a regular dilated eye exam without a medical diagnosis (it is "excluded"), even though that is how those conditions are diagnosed. The value of an annual dilated eye exam cannot be overstated as it can catch many abnormalities that threaten sight, as well as diseases not confined to the eyes, such as diabetes and high blood pressure.

Annual Dilated Eye Exams Should be Covered with No Cost Sharing

The rise of high-deductible health plans in employer-sponsored health care coverage means some individuals might avoid care out of concern of facing significant out-of-pocket expenses. It is essential that an annual dilated eye examination be considered a preventive benefit in plan design, and therefore not subject to a deductible, to encourage utilization of the benefit. Any additional necessary exams during the year might or might not have this first-dollar coverage, depending on employer preference.

Allowance for Materials

After their eye exam, many employees need eyeglasses or contact lenses. A robust medical plan that has comprehensive benefits should consider creating an allowance for materials for those covered by the plan. In the alternative, an optional discount plan could be made available for voluntary purchase by employees to assist with eyewear expenses. With or without an allowance for materials, people covered by the plan still will have seamless access to eye health and vision care from a doctor of optometry.

Evaluate Provider Network Adequacy

It is important to verify that the plan has enough in-network optometrists who are available in counties where 99% of the U.S. population lives. This allows employees covered by the plan to be able to use benefits and build a relationship with a family eye doctor, who can help address emergency or urgency eye care without going to the hospital.

For more information on integrating preventive eye care, please see *Eye Care is Medical Care* and check out the Midwest Business Group on Health's Eye Care [Benefits Toolkit](#).