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EYE CARE COVERAGE ID CARD



Call 866-289-0614 to locate the nearest EyeMed provider. Card must be presented to provider to access benefits.

GOVERNMENT OF THE VIRGIN ISLANDS OF THE U.S.

Name: _____

Policy #: 160-648857-1

Certificate #: _____ Member ID #: _____

Effective Date: _____

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Members present this card to the EyeMed provider of your choice to easily identify yourself as an EyeMed member. Refer to the complete description of your eye care benefit included in your certificate of coverage. Verification of eligibility may still be required for some EyeMed plans.

PROVIDERS:

EyeMed Providers: Call 800-521-6305 or visit
www.eyemedvisioncare.com
to receive plan information and authorization online.

This is not a guarantee of benefits. Eligibility and benefits will be determined at the time the claim is received.

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