

Out-Of-Network Claim Form

Most EyeMed Vision Care plans allow members the choice to visit an in-network or out-of-network vision care provider. You only need to complete this form if you are visiting a provider that is not a participating preation in it is not a participating preation.

Member/@ardian/atient Ignature (not a minor) ate:_

δ Email Frm and Sceipts: