



Vision Insurance – Exams, Glasses & Contacts

Medicare does not cover routine vision care such as eye exams for glasses or contacts. A vision plan can help with exams, frames, lenses, and contact lenses. Here's what to expect.

Why Vision Coverage Matters

- Original Medicare generally does not pay for routine eye exams, glasses, or contact lenses.
- Regular exams can catch vision changes and sometimes other health issues early.
- Glasses and contacts are recurring expenses that add up over time.
- A vision plan can make exams and eyewear more predictable and affordable.

What's Typically Covered

- Comprehensive eye exam (often once per year)
- Frames allowance (a set dollar amount toward frames)
- Lenses (single vision, bifocal, progressive — coverage varies)
- Contact lenses (in place of glasses on many plans)
- Sometimes discounts on extra pairs or lens upgrades
- Network providers usually give the best value

Common Limits & Gaps

- Frame allowances are often modest — designer frames may cost extra
- Frequency limits (exam and eyewear usually once every 12 or 24 months)
- Medical eye conditions (cataracts, glaucoma, etc.) are usually handled by Medicare or medical insurance, not the vision plan
- Out-of-network benefits are often lower
- Always check the plan's allowance amounts and network

Practical Tips

Compare the exam copay, frame allowance, and lens coverage. Using an in-network provider almost always stretches the benefit further. Vision plans are supplemental — they do not replace medical coverage for eye disease.

HOW HUGS CAN HELP

Vision coverage is one piece of a complete protection plan. We can help you compare options and see what fits your needs and budget. At HUGS we have no greater joy than to hear that our clients are walking with confidence.