Humana Vision
For groups with up to 99 employees
Enrollment

ID CARDS
• Access your digital ID card and keep it with you
• To access a copy of your Humana Vision ID card, sign in to MyHumana. Once signed in, you can access your digital card from the ID card center.
• Smartphone users: If you are a smartphone user, you can view your ID card from the MyHumana mobile application. Once on the app, your Humana Vision ID card will appear on your phone under the “eye” icon.

EMPLOYEE CHANGES, ADDITIONS, AND TERMINATIONS
• Employer secured section of Humana.com – Billing & Enrollment
• Fax number: 1-866-584-9140
• Phone: 1-800-232-2006
• Address: Humana Vision, P.O.Box, 14209 Lexington, KY 40512-4209

ENROLLMENT FORMS
• Sign into Humana.com, select "Support & Resources", then choose "Application and Enrollment Forms"
• Phone: 1-800-232-2006

Register on Humana.com
Administering your Humana plan online makes your job easier. To register for online access, go to humana.com, click “Sign In or Register” and follow the instructions. For online support questions, call 1-800-232-2006.

Administrative and billing

GROUP-LEVEL CHANGES
Update addresses, waiting periods, and contact information:
• Humana.com
• Email: BEClericals@humana.com
PREMIUMS

- Phone: **1-800-232-2006**
- The premium payment address is on your monthly premium invoice.
- You can register to pay your invoice electronically on **Humana.com** under your secure Employer Self-Service account.
- If you mail your payment, send any new enrollment or terminations separately using the address noted on your invoice.

Coverage details

You have 24-hour access to the plan document as registered users of **Humana.com**.

Customer care

- **Humana.com**
- Phone: **1-800-232-2006**
- Customer Care specialists are happy to help you Monday through Friday, 8 a.m. to 6 p.m, Eastern time. If you have a speech or hearing impairment and use a TTY, call **1-800-325-2025**.
- The automated information line is available all the time.

Claims

For participating providers:

- Phone: **1-866-537-0229**
- Fax: 1-800-417-3813
- Address: Humana Vision, P.O. Box 14313, Lexington, KY 40512-4313

For non-participating providers:

Mail itemized receipts along with a completed **Out-of-Network Visions Services Claim Form** to:

- Address: Humana Vision, P.O. Box 14311, Lexington, KY 40512-4311

National network

With a Humana Vision plan, your employees have access to one of the largest networks with more than 70,000 participating providers in more than 22,000 locations.

FIND A PARTICIPATING PROVIDER

- On Humana.com select “Find a doctor or pharmacy” the “Search type” select “Vision” then select your plan.
- Phone: **1-800-232-2006**
Important deadlines

Timely applicant

Employees and dependents must enroll for coverage within 31 days of a qualifying event, or 31 days before or 31 days after their eligibility date.

Unless otherwise state-mandated, newborns are considered timely applicants if he/she is added by his/her second birthday. The effective date of coverage will be the first of the month after receiving notification.

Premiums

You will receive your premium bill about two weeks before the due date. Your payment is due the first of the month.

Plan changes

Humana will make group coverage changes on your group’s anniversary date. Let us know what changes you’d like by the 15th of the month before your anniversary date.

Employee coverage changes

Humana generates and sends premium statements about the 15th of each month. To reflect employee coverage changes on your statement, submit the changes by the 10th of the month. Otherwise, pay the full amount on your bill, and your next statement will show the adjustment.