Veterans Affairs Canada | Anciens Combattants Canada

# Vision Care (POC 14)

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# Purpose

This policy provides direction on the provision of appropriate vision care benefits to eligible clients. Vision Care benefits and services are aimed at preserving, maintaining, and correcting vision, and assisting with clients' vision care needs.

# Policy

## Eligibility

1. Benefits are available in accordance with the eligibility criteria outlined in Eligibility for Health Care Programs – Eligible Client Groups, and the specifications set out in the VAC benefit grids and/or other Departmental guidelines/directives.
2. Benefits fall into the following categories:
    a. Eye Examinations
    b. Ophthalmic Tests & Procedures
    c. Intraocular Lenses
    d. Eyeglasses, Contact Lenses, Lens Tinting and Coating
    e. Laser Surgery
    f. Sunglasses

g. Special Vision Care Equipment
h. Low Vision Aids
i. Other Vision Care Benefits and Services

## Providers

3. Vision care services are available from providers licensed to provide the vision care required in the province in which the client receives the treatment.

## Holistic Health

4. When a client holds disability benefits entitlement for the loss of one eye, or the loss of vision in one eye, VAC will provide full POC 14 coverage with respect to both eyes. The Department recognizes that the loss of one eye presents a significant disadvantage to a client. Therefore, it is vital for the client to maintain health and vision in the remaining eye.

## Benefit Grids

5. Guidelines (including approved frequency limits, and requirements for pre-authorization where applicable) for vision care services are located in the Vision Care benefit grids.

## Eye Examinations and Ophthalmic Tests and Procedures

6. VAC provides for major or routine eye examinations, minor eye examinations, and ophthalmic tests as prescribed by approved health professionals, and based on criteria set out in the benefit grids and/or other departmental guidelines/directives.
7. Ophthalmic tests may cover a range of examinations of the eye. Some examples include Biomicroscopy, Ophthalmoscopy, Tonometry and Visual Field Testing.

## Intraocular Lenses

8. Intraocular lenses are available to all eligible clients who require cataract surgery, when they are prescribed by an appropriate health professional (usually an ophthalmologist). These lenses replace the cataract lens, enabling the patient to regain vision in the affected eye.
9. VAC will cover the costs for intraocular lenses as prescribed by an appropriate health professional. The Department may also assume the costs of providing foldable intraocular lenses and procedures to insert them, where the coverage of such costs is not available to the client in the province of residence

## Eyeglasses, Contact Lenses, Laser Surgery

10. VAC will provide for eyeglasses or contact lenses that are necessary for the correction of vision and are prescribed by an approved health professional, as provided in the benefit grids and/or other Departmental guidelines/directives.
11. Where the Department covers the cost of contact lenses, this coverage will apply to necessary procedures, items and fees associated with the use of contact lenses.
12. The frequency limit applicable to eyeglasses applies to each medical condition the client may have. Therefore, the Department may authorize more than one pair of eyeglasses for a client who, for example, requires one pair for reading and second pair for distance viewing, where a bi-focal lens is not seen as a

viable option by the prescribing health professional.

13. Laser surgery may be considered on a case-by-case basis if it is medically supported as the most appropriate intervention, in lieu of eyeglasses or contact lenses, for example, where normal eyeglasses are not an appropriate intervention, given the client's occupation or essential activities.

### Lens Tinting and Coating

14. VAC will authorize lens tinting or lens coating procedures when they are specified in the prescription, as required in the benefit grids and/or other Departmental guidelines/directives.

### Sun Protection

15. Clients may be eligible for a separate pair of non-prescription sunglasses or prescribed tints, if they are required for protection from the sun, as a result of a medical condition diagnosed by an approved health professional. Such conditions may include albinism, cataracts, corneal dystrophies or severe corneal scarring, among others.
16. If the prescriber indicates that a client who wears corrective lenses also requires protection from sunlight, either the lens coatings or clip-on sunglasses must be used for this purpose. For clients who wear contact lenses, either non-corrective sunglasses to be worn in conjunction with contact lenses, or the lens coatings identified or clip-ons for the client's back-up pair of eyeglasses may be provided.

### Special Vision Care Equipment

17. VAC may authorize special vision care equipment as prescribed by approved health professionals, and as provided in the benefit grids and/or other Departmental guidelines/directives.

### Low Vision Aids

18. Individuals with low vision have less than normal vision even with the most accurate conventional prescription available. It is recognized that it is important for clients with vision loss to receive specialized equipment, and any required assistance in its use, in order to maintain a full and independent life.
19. Low vision aids must be prescribed by approved health professionals, low vision clinics or the Canadian National Institute for the Blind (CNIB).

### Other Vision Care Benefits and Services

20. Organizations such as the CNIB provide services such as in-home assessments to determine the client's level of independent functioning, specialized counselling, orientation to blindness, communications skills, ongoing maintenance, and certain costs associated with the use of guide dogs (including nutrition and veterinary treatment).
21. The provider organization will determine if a client is capable of benefiting from its services. Where these services are recommended, the Department may cover the cost of those services not covered under provincial/territorial health insurance plans, based on guidelines set out in the benefit grids and/or other Departmental guidelines/directives.

## References

*Veterans Health Care Regulations*, paragraphs 4(a) and (b)

Eligibility for Health Care Programs - Eligible Client Groups

Eligibility for Health Care Programs - Canada Service Veteran

Health Care Professionals