

New Vision Care Benefits Plan for Clients of the First Nations Health Authority

The First Nations Health Authority (FNHA) has transitioned the administration of its vision care benefits to BC-based benefits provider, Pacific Blue Cross (PBC).

What's New?

Submit all new vision care claims and pre-determinations (PDs) for FNHA clients to PBC using the policy number 40000. Member ID numbers will be the same as clients' Status Numbers.

Vision Care Plan Highlights

No PDs are needed for eye exams and standard prescription eyewear, including contact lenses and multifocal lenses.

For clients 18 and younger:

- \$100 every year for eye exams
 - Eligible for initial coverage under MSP and FNHA will top up coverage to a maximum of \$100 if there is a remaining balance
- \$275 every year for standard prescription eyewear
- \$415 every year for high-index prescription eyewear

For clients 19 and older:

- \$100 every two calendar years for eye exams and sight tests
- \$275 every two calendar years for standard prescription eyewear
- \$415 every two calendar years for high-index prescription eyewear

For clients 65 and older:

- \$100 every two years for eye exams
 - Eligible for initial coverage under MSP and FNHA will top up coverage to a maximum of \$100 if there is a remaining balance
- \$275 every two years for standard prescription eyewear
- \$415 every two calendar years for high-index prescription eyewear



PDs will only be required for exceptional needs. For benefits that require a PD, PBC will accept paper PD forms submitted by mail (PO Box 7000, Vancouver, BC V6B 4E1) or fax (for FNHA clients only: 604-677-0277).

What do I need to do?

Register with PBC

PBC-registered providers can log in to the online portal, PROVIDERnet, where they can directly bill PBC and check client benefit coverage. The online portal provides a streamlined adjudication process for greater efficiency.

If you are registered through one of PBC's sister organizations, such as Medavie Blue Cross, please note that the two are not connected for the administration of the FNHA vision care benefits. Please visit pac.bluecross.ca/provider and register with PBC.

Review Resources

FNHA and PBC have posted resources on their websites. Please review the following documents to find further information about how to submit claims, check eligibility and find details about the FNHA vision care benefits plan:

- [PBC Vision Reference Guide](#)
- [Vision Fee Supplement for Clients of the FNHA](#)

Is FNHA still the last payer (coordination of benefits)?

Yes, the FNHA vision care benefits plan administered by PBC will remain the last payer. If an FNHA client has access to another public (e.g., provincial) or private benefit plan, their claims must be submitted first to that plan for coverage. If the fees are above the maximum limit of the benefit coverage, please inform clients of the out-of-pocket costs in advance.

What number do I call?

If you need assistance, please call PBC at 604-419-2000 or toll-free at 1 877-PAC-BLUE (1-877-722-2583). For questions about the Reference Guide and Fee Supplements and how to log in to PROVIDERnet, visit pac.bluecross.ca/provider.

Questions about claiming or registration?

Call us toll-free at 1.855.550.5454

Visit pac.bluecross.ca/provider



First Nations Health Authority
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