

**EYECARE COVERAGE ID CARD**



**Dependent Coverage** Yes

**Certificate #** 02

Benefits provided under this policy and any limitations that may apply are outlined in your certificate of coverage.

**What to Do**

Vision Claim forms are available on our web site at [www.standard.com](http://www.standard.com). You may also obtain a claim form from the employer listed on the front of this card. We will also accept a universal claim form. For claim and benefit questions please call 1-800-547-9515.

**Mail Claim Forms to:**

Standard Insurance Company  
P.O. Box 82622  
Lincoln, NE 68501-2622