



Vision Insurance Member Contacts

Vision Claims, Benefits, Provider Assistance

<https://davisvision.com/contact/> or (800) 999-5431



Davis Vision (Vision Provider Search and Member Portal)

<https://www.aflac.com/business/products/network-vision-insurance.aspx>

Vision Claims Submission

In Network

Providers should submit all claims to Davis Vision via the provider portal

Out of Network

Please use the Davis OON reimbursement form and submit via mail or the member portal/mobile app to Davis Vision



Mail to: Vision Care Processing Unit
P O Box 1525
Lantham, NY 12110

Aflac Dental & Vision products are offered and underwritten by American Family Life Assurance Company of Columbus in all states but New York Aflac WWHQ | 1932 Wynnton Road | Columbus, GA 31999.

In New York, products are offered and underwritten by American Family Life Assurance Company of New York. 22 Corporate Woods Boulevard, Suite 2 | Albany, New York 12211.

Please see coverage documentation applicable to your situs state for further details. This is a brief product overview only.

NOTICE: The coverage offered is not a qualified health plan (QHP) under the Patient Protection and Affordable Care Act (ACA) and is not required to satisfy essential health benefits mandates of the ACA. The coverage provides limited benefits.

AGC2500198R1V

EXP 10/26