

**State Self Insurance Fund**  
**Guidelines for Repair or Replacement of Eyeglasses**  
**Under Workers' Compensation Benefit**

If a work related incident causes destruction or damage to an employee's eyeglasses while being worn **and** is found to be compensable, the following coverage would apply:

1. If the glasses are able to be repaired, we would pay for the repair **and** replacement parts.
2. In the event glasses cannot be repaired, we would pay for replacement with a **comparable** pair of glasses. **Note:** Should any employee wish to upgrade their glasses, they would be responsible for the difference in cost.
3. Eye examinations are normally covered if there is, or is thought to be, an eye injury, or if a standard examination had not been performed for over a year.

An employee will be reimbursed for the charges, providing we have an itemized statement marked paid by the provider of the services. Or the provider may bill us directly with an itemized statement for payment according to the Kansas Fee Schedule.

Should you have any additional questions, please contact our office at 785-296-2364.

**A WORD OF CAUTION TO EMPLOYEES:** You **MUST** complete **Form WC-00** (Prescription Eyeglasses Replacement Form) that is sent to you by this office and return it before we can pay any changes.

State Self Insurance Fund  
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