

## All Children See – Reimbursement Policy

*Effective Date: June 25, 2025*

*Issued By: Children's Eye Foundation of AAPOS*

*Program Name: All Children See (ACS) – Patient Support Reimbursement Fund*

*Initial Fund Amount: \$25,000*

### **Purpose**

The All Children See (ACS) program connects volunteer pediatric ophthalmologists with children in need of eye care. To further remove barriers to care, the Children's Eye Foundation has established a dedicated fund to support ophthalmologists participating in the ACS program by reimbursing eligible patient-related expenses such as glasses, patches, or other medically necessary supplies.

### **Eligibility**

Only ophthalmologists actively participating as volunteers in the All Children See program are eligible to request funds. Reimbursement is only for items or services provided to patients seen through the ACS program. All requests must include documentation that the child was seen through ACS.

### **Eligible Expenses**

Approved reimbursements may include, but are not limited to:

- Prescription eyeglasses or frames
- Patching supplies (e.g., adhesive patches, occluders)

### **Not Eligible for Reimbursement:**

- Ophthalmologist consultation or exam fees
- Clinic overhead or operational costs
- Payments directly to the ophthalmologist or their practice
- Surgical costs

### **Reimbursement Guidelines**

Maximum Funding Per Practice:

Each ophthalmology practice may request up to \$1,500 per calendar year from the fund, subject to fund availability. If additional funding is required after reaching the cap, practices may submit a supplemental justification, which will be considered if unused funds remain.

### **Payment Method Options:**

- Reimbursement to a third-party vendor: CEF will pay a vendor directly upon receipt of an invoice or bill.
- Reimbursement to the volunteer physician (for vendor expenses): Practices may pay out-of-pocket and submit receipts for eligible expenses to be reimbursed.

Note: Funds will not be issued directly to ophthalmologists or their practices under any circumstances.

### **Application Process**

Practices must submit the following to request reimbursement:

1. Completed ACS Reimbursement Request Form
2. Itemized receipt or invoice
3. Brief description of the patient's need and item provided
4. Proof that the patient was seen through ACS (e.g., appointment confirmation)
5. Requests should be submitted within 60 days of the expense.

**Review and Approval**

Requests will be reviewed by the ACS Committee Chair, Committee Vice-Chair, and CEF Program Manager. Decisions will be made within 10 business days of receiving a completed request. Approved reimbursements will be processed in accordance with CEF's payment schedule.

**Fund Oversight and Limitations**

This program is subject to fund availability. Once the initial funds have been distributed, additional requests may be paused or waitlisted until further funding is secured. CEF reserves the right to modify or suspend the policy at any time based on program performance, funding status, or other considerations.

**Testimonials**

Participating physicians and patient families are strongly encouraged to provide brief testimonials about their experience. While not required, these testimonials play an important role in demonstrating the program's value, raising awareness, and securing ongoing support to expand access to essential pediatric vision care.

**Contact**

For questions or to submit a reimbursement request, contact:  
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