

Vision Care Services	In Network	LENS OPTIONS	MEMBER PAYS
Exam with Dilation (as necessary)	\$10 Copay Options	UV Coating	\$15
Contact Lens Fit and Follow-up		Tint (Solid and Gradient)	\$15
Standard	\$0 Copay	Standard Scratch Resistant Coating	\$15
Premium*	\$0 Copay, 10% off retail, then apply \$55 allowance	Standard Polycarbonate	\$40
Examination Frequency	12 months**	Standard Anti-Reflective Coating	\$45
Contact Lenses (materials only)	In Network	Standard Progressive (Add-on to Bifocal)	\$65
Conventional or Disposable	\$0 Copay, \$80 or \$120 allowance, 15% off balance over allowance (Conventional Only)	Premium Progressive (Add-on to Bifocal)	\$75 plus 80% of charges over \$120 lens allowance
Medically Necessary	Paid-in-full	Other Add-Ons and Services	20% off retail.
Contact Lenses Frequency	12 months**	Discounts available only at network providers and retailers.	
Frames	In Network		
Any available frame at provider location	\$100 frame allowance. 20% off balance over allowance.		
Frames Frequency			
Standard Plastic Lenses	In Network		
Single	10 Copay Options		
Bifocal	10 Copay Options		
Trifocal	10 Copay Options		
Other Add-Ons and Services	20% off retail		
Lenses Frequency	12 months**		