

## Vision Benefits with EyeMed

In-Network Benefits	Exam + Materials - Option 1	Materials Only – Option 2
Routine Eye Exams	\$10 copay No copay at PLUS providers	Not covered
Frames Covered once every other plan year	No copay, \$150 allowance, member receives a 20% discount on pricing above the \$150 allowance. Frames purchased from a PLUS provider have a \$200 allowance.	No copay, \$150 allowance, member receives a 20% discount on pricing above the \$150 allowance. Frames purchased from a PLUS provider have a \$200 allowance.
Lenses (Single, Bifocal, Trifocal, Lenticular and Standard Progressives) Covered once every plan year Contact Lenses	\$10 copay No copay, \$150 allowance	\$10 copay No copay, \$150 allowance
Covered once every plan year Additional Benefits	<ul> <li>No additional charge for standard scratch coating, tinting, UV treatment, or polycarbonate lenses for members under 19.</li> <li>Fixed copay pricing on premium progressives, anti- reflective coatings, and polycarbonate lenses for members 19 and older. Copay pricing varies based on lens options purchased.</li> <li>Discounted pricing on LASIK surgery at US Laser Network providers.</li> </ul>	<ul> <li>No additional charge for standard scratch coating, tinting, UV treatment, or polycarbonate lenses for members under 19.</li> <li>Fixed copay pricing on premium progressives, anti- reflective coatings, and polycarbonate lenses for members 19 and older. Copay pricing varies based on lens options purchased.</li> <li>Discounted pricing on LASIK surgery at US Laser Network providers.</li> </ul>

To find network providers and PLUS providers in your area, go to <u>www.eyemed.com</u>, click on "Find an Eye Doctor", and use the Insight Network.