



Vision Plan



Outline of Benefits – Platinum Preferred

Copayment: \$10 Exam
 \$10 Materials¹
 \$25 Contact Lens Fitting Fee (standard & specialty)

How to Use the Plan

Welcome to Superior Vision’s vision plan. Superior Vision provides primary vision care benefits including eye examinations, prescription eyewear, and contact lenses through a broad-based provider network consisting of ophthalmologist, optometrists, and opticians. The plan also contract with a large number of national and regional optometric chain locations.

Your first step should be to choose an eye care provider, or ensure that your current provider is part of the Superior Vision network. Go to www.superiorvision.com and click on “Locate a Provider” for an updated list. You will learn about “in-network” and “out-of-network” providers - it is an important distinction when receiving benefits. You will also learn more about how to use your benefits, as well as the discounts that are available to you.

Remember that a routine eye exam is important not only for correcting vision problems, but for maintaining healthy eyes and overall health wellness. Superior Vision eye care providers are trained to test for and diagnose a variety of health issues - not just eye problems. Take the time to get to know your vision plan, and start experiencing healthy eyes and healthy living.

Benefits	Frequency	In-Network	Non-Network
Comprehensive Exam (by an Ophthalmologist)	12 Months	Covered in Full	Up to \$44.00
Comprehensive Exam (by a Optometrist)	12 Months	Covered in Full	Up to \$39.00
Frames (Standard)	24 Months	\$150.00 retail allowance	Up to \$77.00
Contact Lens Fitting Standard ² Specialty ²	12 Months	Covered in Full \$50.00 retail allowance	Not Covered Not Covered
Lenses (Standard) per pair Single Bifocal Trifocal Progressive lens upgrade	12 Months	Covered in Full Covered in Full Covered in Full See description ³	Up to \$34.00 Up to \$48.00 Up to \$64.00 Up to \$64.00
Contact Lenses⁴	12 Months	\$150 retail allowance	Up to \$100.00

Co-pays apply to in-network benefits; co-pays for out-of-network visits are deducted from reimbursements.

¹Materials co-pay applies to lenses and frames only, not contact lenses

²See your benefits materials for definitions of standard and specialty contact lens fittings

³Covered to provider’s in-office standard retail lined trifocal amount; member pays difference between progressive and standard retail lined trifocal, plus applicable co-pay.

⁴Contact lenses are in lieu of eyeglass lenses and frames benefit

Discounts on Covered Materials ¹	
Frames	20% off amount over allowance
Conventional Contacts	20% off amount over allowance
Disposable Contacts	10% off amount over allowance

These discounts apply to the glasses and contacts that are covered under the vision benefits.

Discounts on Non-Covered Exam & Materials ¹	
Exams, Frames, and prescription lenses	30% off retail
Contacts, miscellaneous options	20% off retail
Disposable	10% off retail
Retinal Imaging	\$39 maximum member out-of-pocket

We offer discounts on unlimited materials after the initial benefit is utilized.

Lens Type*	Member out-of-pocket ¹
Scratch coat	\$15
Ultraviolet coat	\$12
Tints, solid	\$15
Tints, gradients	\$18
Polycarbonate	\$40
Blue light filtering	\$15
Digital single vision	\$30
Progressives lenses • Standard Premium Ultra Unlimited	\$55 \$110 \$150 \$225
Anti-Reflective coating • Standard Premium Ultra Unlimited	\$50 \$70 \$85 \$120
Polarized lenses	\$75
Plastic photochromic lenses	\$80
High index (1.67 1.74)	\$80 \$120

*The above table highlights some of the most popular lens types and is not a complete listing. This table outlines member out-of-pocket costs¹ and are not available for premium/upgraded options unless otherwise noted.

Laser Vision Correction (LASIK)¹

A National LASIK Network of laser vision correction providers, featuring QualSight, offers Superior Vision members a discount on services. These discounts should be verified prior to service.

Hearing Discounts¹

A National Hearing Network of hearing care professionals, featuring Your Hearing Network, offers Superior Vision members discounts on services, hearing aids and accessories. These discounts should be verified prior to service.

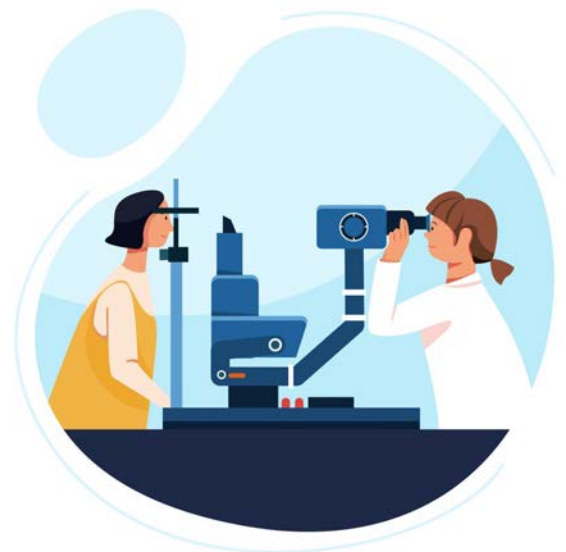
¹Not all providers participate in Superior Vision Discounts, including the member out-of-pocket features. Call your provider prior to scheduling an appointment to confirm if he/she offers the discount and member out-of-pocket features. The discount and member out-of-pocket features are not insurance. Discounts and member out-of-pocket are subject to change without notice and do not apply if prohibited by the manufacturer. Lens options may not be available from all Superior Vision providers/all locations.

Superior Vision Rates

Insured	Semi-Monthly Rates
Employee Only	\$4.85
Employee + 1 Dependent	\$9.40
Employee + Family	\$13.80

Download our Mobile App!

- ✓ Create an online account
- ✓ Locate a provider
- ✓ View your vision benefits
- ✓ Get your member ID card
- ✓ Download on Apple App Store
- ✓ Get it on Google Play



Disclaimer: All final determinations of benefits, administrative duties, and definitions are governed by the Certificate of Insurance Coverage for your vision plan. Please check with your Benefits Administrator or Human Resources department if you have any questions.