



Vision

The County will be offering a new vision option this year in addition to the Base plan. This plan is employee paid. Employees will automatically receive coverage at the Base level, but can purchase the Enhanced plan if they would like to do so.

In-Network Benefits	Basic Plan Design <i>Hybrid Affinity Gold Discount Plan</i>	Enhanced Plan Design
Frequency – Once Every:		
Eye Exam inclusive of Dilation (when professionally indicated) ¹	24 months for adults, 12 months for children up to age 19	12 months
Eye Glass or Contact Lenses ¹	24 months for adults, 12 months for children up to age 19	12 months
Frames	24 months	12 months
Contact Lens Evaluation, Fitting & Follow Up Care (in lieu of eye glasses)	N/A	12 Months
Contact Lenses (in lieu of eye glasses)	24 months	12 months
Copayments		
Eye Exam	\$15	\$10
Eye Glass or Contact Lenses	\$0	\$0
Contact Lens Evaluation, Fitting & Follow Up Care	N/A	\$0
Frame Benefit		
Retail Frame Allowance:	Members receive a \$25 allowance towards spectacle lenses and/or frame. Allowance is applied toward the discounted price; \$40 copay for frames priced up to \$70 retail; \$40 plus 10% the amount over \$70 if retail price is over \$70	Up to \$100 or Up to \$150 at Visionworks ³ Davis Vision Frame Collection⁴ Fashion Level - Covered Designer Level - \$15 member charge Premier Level - \$40 member charge
Eyeglass Lenses		
		Member Charges
Clear plastic single vision	\$35	Covered
Lined bifocal (any size or prescription)	\$55	Covered
Trifocal (any size or prescription)	\$65	Covered
Lenticular (any size or prescription)	\$110	Covered
Tinting of plastic lenses – Solid tint	\$10	\$15
Tinting of plastic lenses – Gradient tint	\$12	\$15
Scratch-resistant coating	\$20	Covered
Polycarbonate lenses	\$30	\$0 for children ⁵ \$35 for adults
Ultraviolet coating	\$15	\$15
Anti-reflective (AR) coating (standard/premium)	\$45	\$40/\$55/Ultra \$69
Progressive lenses (standard/premium)	\$75/\$125	\$65/\$105/Ultra \$140
High-index lenses	\$55	\$60
Polarized lenses	\$75	\$75
Scratch Protection Plan (single vision/multifocal lenses)	N/A	\$20/\$40
Contact Lenses (in lieu of eyeglasses)		
Elective contact lens allowance	Up to \$25 20% Conventional Contact Lenses 10% off Disposable Contact Lenses LENS123® Mail Order Contact Lens replacement program up to 50% off retail	Up to \$110 Plus a 15% discount on any overage ²
Evaluation, fitting & follow up care – Standard & Specialty Lens Types	N/A	15% discount
Visually required contact lenses (with prior approval) Materials, evaluation, fitting & follow up care	Covered	Covered



Out of Network Reimbursement Schedule:	Basic Plan	Enhanced Plan
Eye Exam	\$25	\$40
Frame	\$25	\$50
Single vision lenses		\$40
Bifocal/progressive lenses		\$60
Trifocal lenses		\$80
Lenticular lenses	N/A	\$100
Elective contact lenses		\$80
Visually required contact lenses		\$225
One Year Eyeglass Breakage Warranty	<i>Included on both plans</i>	

Rates:	Basic Plan Design <i>Hybrid Affinity Discount Plan</i>	Enhanced Plan Design
Single:	\$0.00	\$3.86
Family:	\$0.00	\$10.71

1/ Annual exam and eyeglasses for dependents under age 19.

2/ Additional discounts are not applicable at Costco or Sam's Club.

3/ Enhanced frame allowance is available at all Visionworks locations nationwide.

4/ Collection is available at most participating independent provider offices. Collection is subject to change.

5/ Polycarbonate lenses are covered for dependent children, monocular patients and patients with prescriptions +/- 6.00 diopters or greater.

Open Enrollment Line	After Enrollment
For information prior to enrolling , please visit Davis Vision's Website at www.davisvision.com or call 1-877-923-2847 and enter client control code 4467 for the Base plan and 7864 for the Enhanced plan.	Once enrolled , please visit Davis Vision's website at www.davisvision.com or call 1-800-999-5431 with questions.