ONEIDA NATION

Policy #: 010-301285



Vision Plan Benefits

	EyeMed Access Network	Out-of-Network
Annual Eye Exam	Covered in full	Up to \$40
Single Vision Lenses	Covered in full	Up to \$40
Bifocal Lenses	Covered in full	Up to \$60
Trifocal Lenses	Covered in full	Up to \$80
Lenticular Lenses	20% discount	No benefit
Progressive Lenses	See lens options	NA
Frames	\$130	\$45
Contact Fit & Follow up Exam	Standard: Member Cost up to \$55 Premium: 10% off of retail	No benefit
Contacts (elective)	Up to \$125	Up to \$125
Contacts (medically necessary)	Covered in full	Up to \$ 210
Deductible		
Annual (applies to first service received)	\$0	\$0
Eyeglass Lenses or Frames	\$0	\$0

Benefit Frequencies (months)
Exam/Lens/Frame

Based on Date of Service

Exam/Lens/Frame 12/12/24

Member cost for lens options (may vary by prescription, option chosen and retail location)

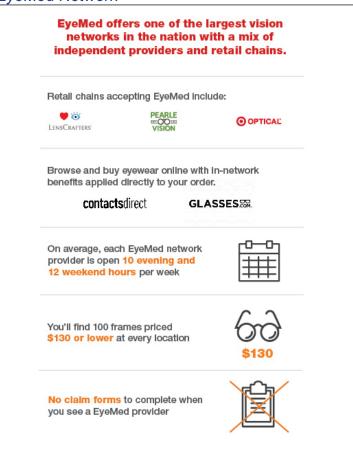
Progressive Lenses	Standard: \$65 + lens deductible Premium: lens cost -20% discount -\$120 allowance + Standard Progressive cost	No benefit
Std. Polycarbonate	\$40	No benefit
Tint (solid and gradient)	\$15	No benefit
Scratch Resistant Coating	\$15	No benefit
Anti-Reflective Coating	\$45	No benefit
Ultraviolet Coating	\$15	No benefit
Lasik or PRK	Average discount of 15% off retail price or 5% off promotional price at US Laser network participating providers.	No benefit

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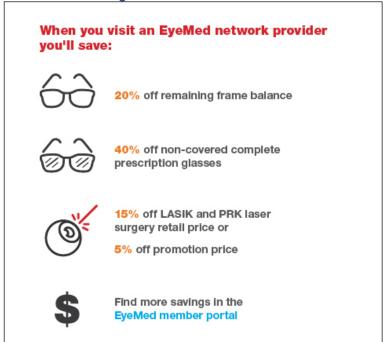
EyeMed Network



Customer Service

EyeMed <u>866-289-0614</u> <u>www.eyemedvisioncare.com</u> Mon-Sat 8am-11pm, Sun 11am-8pm (EST)

Additional Savings



Based on applicable laws, reduced costs may vary by doctor location

Rx Savings

Save on Prescription medications at 60,000 Pharmacies across the nation including CVS, Walgreens, Rite Aid and Walmart. Just Present your Rx savings card. To access and print your Rx savings cards, visit ameritas.com, register/sign in to your secure member account and select member savings. This discount is offered at no additional cost and is not insurance.

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