

	EyeMed Vision Care	
	EyeMed Provider	Non-EyeMed Provider
Who may enroll	Eligible employees, U.S.-based retirees, COBRA, and AB528 participants	
Office Locations	More than 34,000 providers nationwide, including LensCrafters, Pearle Vision, Sears Optical, Target Optical, JC Penney optical locations, as well as independent providers; call EyeMed directly for locations	Not applicable
Annual Deductible	None	None
Examination (1 every 12 months)	Plan pays 100%	Plan pays \$20
Lenses: (1 pair every 12 months) Single Vision Lined Bifocal Lined Trifocal Lenticular Standard progressive	Plan pays 100% Plan pays 100% Plan pays 100% Plan pays 100% You pay \$65 copay	Plan pays up to \$20 Plan pays up to \$30 Plan pays up to \$40 Plan pays up to \$50 Plan pays up to \$30
Frame: (1 every 24 months)	Plan pays up to \$100, plus 20% off the balance over \$100	Plan pays up to \$40
Contact Lenses: (in lieu of lenses every 12 months)	Plan pays 100% for medically necessary contact lenses; Plan pays up to \$105 for elective contact lenses	Plan pays up to \$50
Optional Features: (tinted lenses, scratch-resistant and ultra-violet coatings, polycarbonate) Members receive 20% discount on all other add-ons.	Plan pays 100% for tint and scratch-resistant coating; you pay \$15 to \$65 for additional features	Tinted lenses Plan pays up to \$5 Standard scratch-resistant Plan pays up to \$5
Laser Vision Correction	Discounts on PRK or LASIK; Please call 1-877-5LASER6	Not covered