

What's covered

BENEFIT	FREQUENCY	IN-NETWORK BENEFIT	OUT-OF-NETWORK BENEFIT
Exam services			
WellVision exam®	1 per 12 months	\$10 for exam	Up to \$45
Routine retinal screening		No more than a \$39 copay	N/A
Laser vision correction discount			
	Once per eye per life-time.	Average 15% off the regular price or 5% off the promotional price.	N/A
		Discounts only available from contracted facilities.	
Lenses			
Single lined			Up to \$30
Bifocal lined			Up to \$50
Trifocal	1 per 12 months	\$25 (lenses and frame)	Up to \$60
Lenticular			Up to \$100
Necessary contacts			Up to \$210
Lens enhancements			
Standard		\$55 copay	N/A
Premium progressive		\$95-\$105 copay	N/A
Custom progressive		\$150-\$175 copay	N/A
Other		Average savings of 20-25%	N/A
Frames			
	1 per 24 months	\$130 for the frame of your choice and 20% off the amount over your allowance	Up to \$70
		\$70 allowance at Costco® and Walmart**	
Elective contact lenses			
Contact lenses are in place of lenses and frame.	1 per 12 months	\$60 for your contact lens exam (fitting and evaluation)	Up to \$105
		\$130 for contact lenses	
Additional glasses and sunglasses discount			
	20% off complete pairs of prescription and non-prescription glasses, including sunglasses. Discounts are unlimited for 12 months following exam.		N/A
Coverage with retail providers			
	*Coverage with retail providers may be different. Check with Costco for VSP member pricing. Costco and Walmart allowance is equivalent to the allowance at preferred providers and other retail providers.		

This chart outlines services for Plan 3.

Administrative services for the vision insurance plan are provided by Vision Service Plan (VSP)®.