## ENHANCE YOUR BENEFITS WITH

# VISION COVERAGE

#### **VISION CARE SERVICES**

(OUT-OF-NETWORK REIMBURSEMENT N/A IF NOT LISTED)

## VISION EXAM | (includes refraction)

IN-NETWORK Covered in full MEMBER COST after \$10 copay

OUT-OF-NETWORK REIMBURSEMENT Up to \$35

## VISION EXAM | Retinal Imaging

Up to \$45 member IN-NETWORK MEMBER COST out-of-pocket max.

## CONTACT LENS FIT&FOLLOW UP

**Standard Contact Lens Fitting** 

Up to \$50 member IN-NETWORK MEMBER COST..... out-of-pocket max.

## CONTACT LENS FIT&FOLLOW UP

**Custom Contact Lens Fitting** 

**IN-NETWORK** Up to \$75 member MEMBER COST..... out-of-pocket max.

## MATERIALS\*

**IN-NETWORK** 

MEMBER COST \$25 copay

(Materials copay applies to frame or spectacle lenses, if applicable) \*At participating locations. Contact your agent for more details.

#### PREVENTIVE SERVICES

## 100% No Waiting Period

Routine Exams, Cleanings, Bitewing X-Rays and more

#### **BASIC SERVICES**

## 80% No Waiting Period

Fillings, Simple Extractions, Full Mouth X-Rays and more

#### **MAJOR SERVICES**

## 50% | 1 Year Waiting Period\*

Crowns, Inlays, Implants, Oral Surgery, Complex Extractions and more

> \*Waiting period can be waived with proof of prior coverage



# DENTAL HEARING

#### **NEW VIRTUAL SERVICES**

### **Virtual Screening**

Determine need from the comfort of home

## **Personalized Coaching**

Enhance adjustment and use of hearing aids

#### **On-Demand Virtual Visits**

Convenient care for non-clinical support



#### RISK-FREE TRIAL



Find your right fit by trying your hearing aids for 60 days

#### COMPLIMENTARY AFTERCARE

## 1-Year Follow-Up Care

Ensures smooth transition to your new hearing aids

## 2-Year Battery Support

Battery supply or charging station to keep you powered

## **3-Year Warranty**

Coverage for loss, repairs, or damage

