

OPTICARE PLAN:

10-120B

Uintah School District

Products/Services	In Network	Out-Of-Network
Eye Exam		
Eyeglass exam	\$10 Co-pay	\$40 Allowance
Contact exam	\$10 Co-pay	\$40 Allowance
Routine Dilation	100% Covered	Included above
Contact Fitting	Retail	Included above
Standard Plastic Lenses		
Single Vision	\$10 Co-pay	\$85 Allowance for lenses, options, and coatings
Bifocal (FT 28)	\$10 Co-pay	
Trifocal (FT 7x28)	\$10 Co-pay	
Lens Options		
Progressive (Standard plastic no-line)	\$50 Co-pay	
Premium Progressive Options	\$100 Co-pay	
Ultra-Premium Progressive Options	Up to 20% Discount	
Polycarbonate	25% Discount	
High Index	25% Discount	
Coatings		
Scratch Resistant Coating	\$10 Co-pay	
Ultra Violet protection	\$10 Co-pay	
Other Options	Up to 25% Discount	
A/R, edge polish, tints, mirrors, etc.		
Frames		
Allowance Based on Retail Pricing	\$120 Allowance	\$80 Allowance
Additional Eyewear		
Additional Pairs of Glasses Throughout the Year	Up to 50% Off Retail	
Contacts		
Contact benefits is in lieu of lens and frame benefit.	\$120 Allowance	\$80 Allowance
Additional contact purchases:		
***Conventional	Retail	
***Disposables	Retail	
Frequency		
Exams, Lenses, Frames, Contacts	Every 12 months	Every 12 months
Refractive Surgery		
****LASIK	\$250 Off Per Eye	Not Covered

DISCOUNTS

Any item listed as a discount is a merchandise discount only and not an insured benefit. Discounts vary by providers, see provider for details

- Up to 20% Discount off balance above Frame Allowance
- 50% discount varies by provider, ask provider for details.
- Must purchase full year supply to receive discounts on select brands. See provider for details.
- LASIK (Refractive surgery) Standard Optical Locations ONLY.
- LASIK services are not an insured benefit – this is a discount only.

All pre & post-operative care is provided by Standard Optical only and is based on Standard Optical retail fees.

Out of Network – Out of Network benefit may not be combined with promotional items. Online purchases at approved providers only.