



Employee Benefits - Vision Plan Summary

Effective 7/1/24 - This Document is a summary of coverage only. The MMIA Employee Benefits Program Plan Documents are available at www.mmiaeb.net and must be referenced for details of all coverages.

Benefit Period (July 1 - June 30)

Benefits Every 12 Months	In Network	Out of Network
Well Vision Exam	\$20 Copay (no more than \$39 copay for retinal screenings as an enhancement to an exam)	Up to \$50
Frames	<ul style="list-style-type: none"> • \$165 allowance at retail • \$90 allowance at Costco and Walmart • 20% saving after allowance 	Up to \$70
Lenses (included with exam copay)	<ul style="list-style-type: none"> • Single vision, lined bifocal, and trifocal lenses • Polycarbonate for children 	<ul style="list-style-type: none"> • Single vision - Up to \$50 • Lined bifocal - Up to \$75 • Lined trifocal - Up to \$100
Lens Enhancements	<ul style="list-style-type: none"> • Standard progressive: \$0 copay • Premium progressive: \$80-\$90 copay • Custom progressive: \$120-\$160 copay 	
Contacts (instead of glasses)	<ul style="list-style-type: none"> • \$140 allowance for contact lenses • Up to \$60 for contact lens exam (fitting and evaluation) 	Up to \$105
Laser Vision Correction Discount	<i>Average 15% off regular price or 5% off promotional price; discounts only available from contracted facilities</i>	