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EMIHealth.com

Group:

Plan:

Underwritten by / Administered by:

Plan Type:

Effective Date:

Benefit Year:

Southern Utah University (Plan #144)

Vision 130B

Opticare of Utah / Educators Health Plans Life, Accident & Health

Voluntary

7/1/2014

Contract

	In-Network	Out-of-Network
Eye Exam	No Eye Exam Benefit	
Lenses		
Single Vision	\$10 Co-pay	▲ \$85 Allowance for lense, options, and coatings
Bifocal (FT 28)	\$10 Co-pay	
Trifocal (FT 7*28)	\$10 Co-pay	
Lens Options		
*Progressive (Standard no-line)	\$50 Co-pay	
*Premium Progressive Options	No Discount	
Glass Lenses	15% Discount	
Polycarbonate	25% Discount	
High Index	25% Discount	
Coatings		
Scratch Resistant Coating	\$10 Co-pay	
Ultra Violet protection	\$10 Co-pay	
Other Options <i>A/R edge polish, tints, mirrors, etc.</i>	Up to 25% Discount	
Frames		
Allowance Based on Retail Pricing	\$130 Allowance	▲ \$90 Allowance
**Additional Pairs of Glasses Throughout the Year	Up to 50% Off Retail	
Contacts		
Contact benefits is in lieu of lens and frame benefit.	\$130 Allowance	▲ \$90 Allowance
Additional contact purchases:		
***Conventional	Retail	
***Disposables	Retail	
Frequency		
Lenses, Frames, Contacts	Every 12 Months	Every 12 Months
Refractive Surgery		
****LASIK	\$250 Off Per Eye	Not Covered
Monthly Rates		
Employee	\$4.10	
Two Party	\$7.90	
Family	\$12.60	

Discounts - Any item listed as a discount in the benefit outline above is a merchandise discount only and not an insured benefit. Providers may offer additional discounts.

* Co-pays for Progressive lenses may vary. This is a summary of plan benefits. The actual Policy will detail all plan limitations and exclusions.

**50% discount at Standard Optical locations Only. All other Network discounts vary from 20% - 35%

***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 – Allowances are reimbursed at 75% when discounts are applied to merchandise. Promotional items or Online purchases not covered.