

# Meadows Regional Medical Center Employee Healthcare Plan Open Enrollment Quick Reference Summary

Effective January 1, 2011

## Vision Benefit Year: Jan 1 through Dec 1, 2011

**Premiums (per pay period) *Spousal surcharge does not apply to the vision plan***

Employee	\$3.16
Employee + Spouse	\$6.00
Employee + Child(ren)	\$6.29
Employee + Family	\$9.67

Benefits	In-Network (after applicable copays)	Out of Network Reimbursement
Comprehensive Exam	\$10.00	\$40.00
Materials	\$25.00	N/A
Lenses: <sup>2</sup>	<b>*Covered in Full (See Limits)</b>	
Single Vision		\$40.00
Bifocal		\$60.00
Trifocal		\$80.00
Lenticular		\$80.00
Frames:		\$45.00
Contact Lenses in lieu of eyeglasses:		
Elective		\$105.00
Necessary <sup>1</sup>		\$210.00

<sup>1</sup> Medically necessary contact lenses are determined at the provider's discretion for one or more of the following conditions: Following post cataract surgery without intraocular lens implant, to correct extreme vision problems that cannot be corrected with spectacles lenses; with certain conditions of anisometropia; with certain conditions of keratoconus.

<sup>2</sup> Lens Options such as progressive lenses, polycarbonate lenses, tints and anti-reflective coating may be available at a discount.

### In-Network Benefits Limits

* Frame Benefit -	Private Practice Provider - \$50 wholesale allowance (approximate retail value of \$120 - \$150) Retail Chain Provider - \$130 retail frame allowance
*Contact Lens Benefit - (contact allowance \$105)	Covered-in-full contact lenses in lieu of eyeglasses The covered-in-full contact lens benefit at network providers includes the fitting/evaluation, contacts, and two follow-up visits (after copay). Disposable lenses, up to 4 boxes are included when obtained from a network provider

Benefits Frequency	In-Network	Out of Network Reimbursement
Comprehensive Exam	12 months	12 months
Spectacle Lenses	12 months	12 months
Frames	24 months	24 months
Contact Lenses	12 months	12 months

### Laser Vision Benefit

United Healthcare Vision has partnered with the Laser Vision Network of America (LVNA) to provide our members with access to discounted laser correction providers. 1-877-28-SIGHT