SKF SANITATION DISTRICT VISION CARE BENEFITS

Eye Exam, per person, in a 12 month period. Materials. Lenses. (tinted, anti-glare and polycarbonate lenses are covered for employees only) Frames. once every 12 months up to a maximum allowance of \$35.00	Benefit Category	Copayment
Lenses	Eye Exam, per person, in a 12 month period	. \$10.00
Lenses	Materials	0 -
Frames		
Frames	(tinted, anti-glare and polycarbonate lenses are covered for employees only)	
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allowance of \$35.00		up to a maximum
		allowance of \$35.00
Medically necessary contact lenses	Medically necessary contact lenses	once every 12 months
up to a maximum		up to a maximum
allowance of \$250.00		allowance of \$250.00
Non-medically necessary contact lenses	Non-medically necessary contact lenses	once every 12 months
up to a maximum		up to a maximum
allowance of \$100.00		allowance of \$100.00
*Safety Glasses (employee only)	*Safety Glasses (employee only)	
Examonce every 12 months		once every 12 months
up to a maximum		•
allowance of \$100.00		-
Materialsonce every 12 months	Materials	once every 12 months
up to a maximum		
allowance of \$240.00		-

*NOTE: The District will pay the difference between the amount eligible for regular glasses and safety glasses for employees only.