

# Vision plan benefits for Madison Area Technical College

You may choose from two plans: exam & materials plan, or materials only plan

## Benefits through Superior Select Midwest network



### Benefits

Exam
Frames
Lenses (standard) per pair
Single vision
Bifocal
Trifocal
Progressive
Contact lenses <sup>2</sup>
Medically necessary contact lenses
LASIK vision correction <sup>3</sup>

Exam & materials plan	
<b>Deductibles</b>	
Exam	\$0
Materials	\$0
<b>Monthly premiums</b>	
Emp. only	\$9.45
Emp. + family	\$23.60
<b>Services/frequency</b>	
Exam	12 months
Frames	12 months
Lenses	12 months
Contact lenses	12 months

Materials only plan	
<b>Deductibles</b>	
Exam	N/A
Materials	\$0
<b>Monthly premiums</b>	
Emp. only	\$6.00
Emp. + family	\$15.01
<b>Services/frequency</b>	
Exam	N/A
Frames	12 months
Lenses	12 months
Contact lenses	12 months

	In-network	Out-of-network	In-network	Out-of-network
Exam	Covered in full	Up to \$35	N/A	N/A
Frames	\$150 retail allowance	Up to \$75	\$150 retail allowance	Up to \$75
Lenses (standard) per pair				
Single vision	Covered in full	Up to \$25	Covered in full	Up to \$25
Bifocal	Covered in full	Up to \$40	Covered in full	Up to \$40
Trifocal	Covered in full	Up to \$45	Covered in full	Up to \$45
Progressive	See description <sup>1</sup>	Up to \$45	See description <sup>1</sup>	Up to \$45
Contact lenses <sup>2</sup>	\$175 retail allowance	Up to \$150	\$175 retail allowance	Up to \$150
Medically necessary contact lenses	Covered in full	Up to \$150	Covered in full	Up to \$150
LASIK vision correction <sup>3</sup>	\$200 allowance	\$200 allowance	\$200 allowance	\$200 allowance

Deductibles apply to in-network benefits only

<sup>1</sup> Covered to provider's in-office standard retail lined trifocal amount; member pays difference between progressive and standard retail lined trifocal, plus applicable deductible

<sup>2</sup> Contact lenses and related professional services (fitting, evaluation and follow-up) are covered in lieu of eyeglass lenses and frames benefit

<sup>3</sup> Lasik Vision Correction is in lieu of eyewear benefit, subject to routine regulatory filings and certain exclusions and limitations

### Discount features

Look for providers in the provider directory who accept discounts, as some do not; please verify their services and discounts (range from 10%-30%) prior to service as they vary.

#### Discounts on covered materials

Frames:	20% off amount over allowance
Lens options:	20% off retail
Progressives:	20% off amount over retail lined trifocal lens, including lens options
Specialty contact lens fit:	10% off retail, then apply allowance

#### Maximum member out-of-pocket

The following options have out-of-pocket maximums<sup>4</sup> on standard (not premium, brand, or progressive) lenses.

	Single vision	Bifocal & trifocal
Scratch coat	\$13	\$13
Ultraviolet coat	\$15	\$15
Tints, solid or gradients	\$25	\$25
Anti-reflective coat	\$50	\$50
Polycarbonate	\$40	20% off retail
High index 1.6	\$55	20% off retail
Photochromics	\$80	20% off retail

<sup>4</sup> Discounts and maximums may vary by lens type. Please check with your provider.

[superiorvision.com](http://superiorvision.com)

(800) 507-3800

#### Discounts on non-covered exam, services and materials

Exams, frames, and prescription lenses:	30% off retail
Lens options, contacts, miscellaneous options:	20% off retail
Disposable contact lenses:	10% off retail
Retinal imaging:	\$39 maximum out-of-pocket

#### Refractive surgery

Superior Vision has a nationwide network of independent refractive surgeons and partnerships with leading LASIK networks who offer members a discount. These discounts range from 10%-50%, and are the best possible discounts available to Superior Vision.

*The Plan discount features are not insurance.*

*All allowances are retail; the member is responsible for paying the provider directly for all non-covered items and/or any amount over the allowances, minus available discounts. These are not covered by the plan.*

*Discounts are subject to change without notice.*

*Disclaimer: All final determinations of benefits, administrative duties, and definitions are governed by the Certificate of Insurance for your vision plan. Please check with your Human Resources department if you have any questions.*