



GENERAL
VISION
SERVICES

7502
COBANC HEALTH & WELFARE FUND (RANGE
OFFICERS)

Below you will find your Full Benefits Summary including your Vision Benefits, Enhanced Benefits, and Bonus Benefits. Please print this document and bring it with you to your appointment. If you need any assistance, please call 1-855-653-0586.

VISION BENEFITS SUMMARY

Description	Co-pays
EXAMINATION	
Includes Tonometry	INCLUDED
FRAMES	
Up to \$250	INCLUDED
Non Covered Frame	U&C less \$150
LENSES	
Single Vision	INCLUDED
Flat Top FT28 & FT35	INCLUDED
TriFocals	INCLUDED
Blended Bifocal	INCLUDED
Standard Progressive	INCLUDED
Safety 3MM	INCLUDED
Oversize	INCLUDED
Cataract Lenses	INCLUDED
MATERIALS	
Plastic	INCLUDED
Polycarbonate	INCLUDED
1.56 Single Vision	INCLUDED
COATINGS	
Cosmetic or Sunglass Tint	INCLUDED
Scratch Resistant Coating	INCLUDED
Ultra Violet Coating	INCLUDED
Anti-reflective Standard Coating	U&C less 35%
All other premium AR	INCLUDED
CONTACTS	
Colored Contact Lenses are NOT included	
Fitting and Dispensing Included for the following Lenses	INCLUDED
Spherical Disposables 9 month supply	INCLUDED
Non Covered Contact Lenses	U&C less \$150

LENS BENEFITS CO-PAYS

MATERIALS/HI-INDEX LENSES

1.60 Single Vision	\$60.00 co-pay
1.60 Bifocal	\$100.00 co-pay
1.60 Hi-Index Premium Progressive	U&C less 35%
1.60 Hi-Index Standard Progressive	\$150.00 co-pay
Polycarbonate Standard Progressive	\$80.00 co-pay
Poycarbonate Premium Progressive	U&C less 35%

PROGRESSIVE LENSES

Premium Progressives	\$90.00 co-pay
All other Progressive Lens Upgrades	U&C less 35%

PLASTIC PHOTOSENSITIVE LENSES

Photochromatic Single Vision	\$50.00 co-pay
Photochromatic Bifocal	\$75.00 co-pay
Photochromatic Trifocals	\$100.00 co-pay
Photochromatic Standard Progressives	\$105.00 co-pay
Photochromatic Hi-Index	\$130.00 co-pay
Non Covered Lenses	U&C less 35%

OTHER LENS OPTIONS

Crizal Antiglare (where available)	U&C less 30% plus \$95.00 co-pay
Other Premium Antiglare	U&C less 35%
Polarized	\$85.00 co-pay

Please make an appointment. Doctors hours may vary from store hours.

For Florida locations, eye exams may have a co-pay.

Any additional services that surpass the benefit are the responsibility of the patient.