



GENERAL
VISION
SERVICES

7520

COBANC HEALTH & WELFARE FUND (PART-TIME MEMEBERS)

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
Contact Lens Exam and Fitting	INCLUDED
FRAMES	
Up to \$150 within GVS Collection	INCLUDED
Non Covered Frame	U&C less \$100
LENSES	
Single Vision	INCLUDED
Bifocal (FT28 & FT35)	INCLUDED
TriFocals	INCLUDED
Safety 3MM	INCLUDED
Oversize	INCLUDED
MATERIALS	
Plastic	INCLUDED
Polycarbonate for children 16 and under included	INCLUDED
COATINGS	
Cosmetic or Sunglass Tint	INCLUDED
Anti-reflective Standard Coating	\$40.00 co-pay
All other Premium Anti Glare Coating	U&C less 30%
Crizal Anti Glare (where available)	\$143.00 co-pay
Ultra Violet Coating	INCLUDED
CONTACTS	
Colored Contact Lenses are NOT included	
Standard Disposables (3 month supply)	INCLUDED
Fitting Fee for Upgraded Lenses	\$50.00 co-pay
Non-covered Contact Lenses	U&C less \$100

LENS BENEFITS CO-PAYS

MATERIALS/HI-INDEX LENSES

1.60 Single Vision	\$90.00 co-pay
1.60 Hi-Index Bifocal FT28	\$150.00 co-pay
1.60 HiIndex Premium Progressive	U&C less 30%
1.60 Progressive	\$180.00 co-pay
Polycarbonate Single Vision	\$60.00 co-pay
Polycarb BiFocals FT28	\$80.00 co-pay
Polycarb Standard Progressive	\$120.00 co-pay
Polycarb Premium Progressive	U&C less 30%
1.56 Single Vision	\$60.00 co-pay
All other Hi-Index Lenses	U&C less 30%

PROGRESSIVE LENSES

Varilux Comfort	\$135.00 co-pay
Premium Plus Progressives	U&C less 30%

PLASTIC PHOTSENSITIVE LENSES

Photochromatic HiIndex	\$160.00 co-pay
Photochromatic Single Vision	\$75.00 co-pay
Photochromatic Lenses; Bifocal (FT28 & FT35)	\$113.00 co-pay
Photochromatic Lenses; Tri Focals	\$150.00 co-pay
Photochromatic Standard Progressive	\$158.00 co-pay
Photochromatic Lenses; Premium Progressives	U&C less 30%

OTHER LENS OPTIONS

Polarized	\$125.00 co-pay
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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.