



City of Concord

130 130 Voluntary

Effective Date: July 1, 2022

DeltaVision® is supported by the nationwide EyeMed Vision Care Access Network, including private practitioners and the most popular retail and online retail locations.

DeltaVision Plan Summary

	Network Benefit	Non-Network Reimbursement
Exam every <u>12 months</u> : Comprehensive with dilation as necessary	Member co-pay \$20; plan pays balance	Up to \$35
Contact Lens Fit and Follow-up: Standard Lenses <i>Spherical clear contact lenses in conventional wear and planned replacement (Examples include but not limited to disposable, frequent replacement, etc.)</i>	Member pays up to \$55.00	None
Contact Lens Fit and Follow-up: Premium Lenses <i>Includes all lens designs, materials and specialty fittings other than Standard Contact Lenses (Examples include toric, multifocal, etc.)</i>	10% discount off retail	None
*Frames every <u>24 months</u> : Any available frame at provider location	\$130 allowance, then 20% off balance	Up to \$65
Standard Plastic Lenses every <u>12 months</u>		
Single vision / Bifocal / Trifocal	Member co-pay \$20, plan pays balance	Up to \$25 / \$40 / \$55
Lens Options		
UV coating / Tint / Standard scratch resistance	Member co-pay \$15 each	None
Standard polycarbonate	Member co-pay \$40	None
Standard anti-reflective coating	Member co-pay \$45	None
Standard progressive	Member co-pay \$85	None
Premium progressive	\$85 co-pay, 80% of charge less \$120 allowance	None
Other add-ons and services	20% off retail price	None
*Contact Lenses every <u>12 months</u> : <i>In lieu of spectacle lenses; allowance covers materials only.</i>		
Conventional	\$130 allowance, then 15% off balance	Up to \$104
Disposable	\$130 allowance, member pays balance	Up to \$104
Medically necessary	Paid in full	Up to \$200
Laser Vision Correction - Lasik or PRK	15% off retail price or 5% off promotional price	None

*Frame and Contact allowance are one-time-use benefits during the frequencies shown.

Monthly Rates

Employee	\$5.59
Employee + Spouse	\$10.91
Employee + Child(ren)	\$10.57
Family	\$16.54

Rates Guaranteed Until:
June 30, 2026

To locate a participating EyeMed Access Network provider, log on to member.eyemedvisioncare.com/nedd or call 1-866-723-0513.

Additional In-Network Discounts

- 20% discount on items not covered by the plan at network providers, which may not be combined with any other discounts or promotional offers, and the discount does not apply to EyeMed provider's professional services, or contact lenses. Retail prices may vary by location.
- Members also receive a 40% discount off complete prescription eyeglass purchases and a 15% discount off conventional contact lenses once the funded benefit has been used.
- ContactsDirect.com and Glasses.com give members access to on-line retailers where benefits can be used. Visit these websites for additional information.
- Discounts do not apply for benefits provided by other group benefit plans.