

Alabama State Chiropractic Association Vision Plan Benefits

Co-Pays	Premiums - Monthly	Services/Frequency
Exam \$10	Emp. only \$7.13	Exam 12 months
Materials ¹ \$25	Emp. + spouse \$14.24	Frame 24 months
Contact Lens Fitting (standard & specialty) \$30	Emp. + child(ren) \$16.80	Contact Lens Fitting 12 months
	Emp. + family \$25.73	Lenses 12 months
		Contact Lenses 12 months

(Based on date of service)

Benefits

	In-Network	Out-of-Network
Exam (Ophthalmologist)	Covered in full	Up to \$34 retail
Exam (Optometrist)	Covered in full	Up to \$26 retail
Frames	\$130 retail allowance	Up to \$62 retail
Contact Lens Fitting (standard)	Covered in full	Not covered
Contact Lens Fitting (specialty ²)	\$50 retail allowance	Not covered
Lenses (standard) per pair		
Single Vision	Covered in full	Up to \$26 retail
Bifocal	Covered in full	Up to \$39 retail
Trifocal	Covered in full	Up to \$49 retail
Progressive lens upgrade	See description ³	Up to \$49 retail
Contact Lenses ⁴	\$130 retail allowance	Up to \$100 retail

Co-pays apply to in-network benefits; co-pays for out-of-network visits are deducted from reimbursements

¹ Materials co-pay applies to lenses and frames only, not contact lenses

² The specialty contact lens fitting is for new contact lens wearers and/or a member who wears toric, gas permeable, or multifocal lenses.

³ Covered to provider's in-office standard retail lined trifocal amount; member pays difference between progressive and standard retail lined trifocal, plus applicable co-pay

⁴ Contact lenses are in lieu of eyeglass lenses and frames benefit

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

The following options have out-of-pocket maximums⁵ on standard (not premium, brand, or progressive) lenses.

	Maximum Member Out-of-Pocket	
	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

Discounts on Non-Covered Exam and Materials

Exams, frames, and prescription lenses:	30% off retail
Lens options, contacts, other prescription materials:	20% off retail
Disposable contact lenses:	10% off retail

⁵ Discounts and maximums may vary by lens type. Please check with your provider.

SuperiorVision.com
Customer Service
800.507.3800

Refractive Surgery

Superior Vision has a nationwide network of refractive surgeons and leading LASIK networks who offer members a discount. These discounts range from 15%-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.

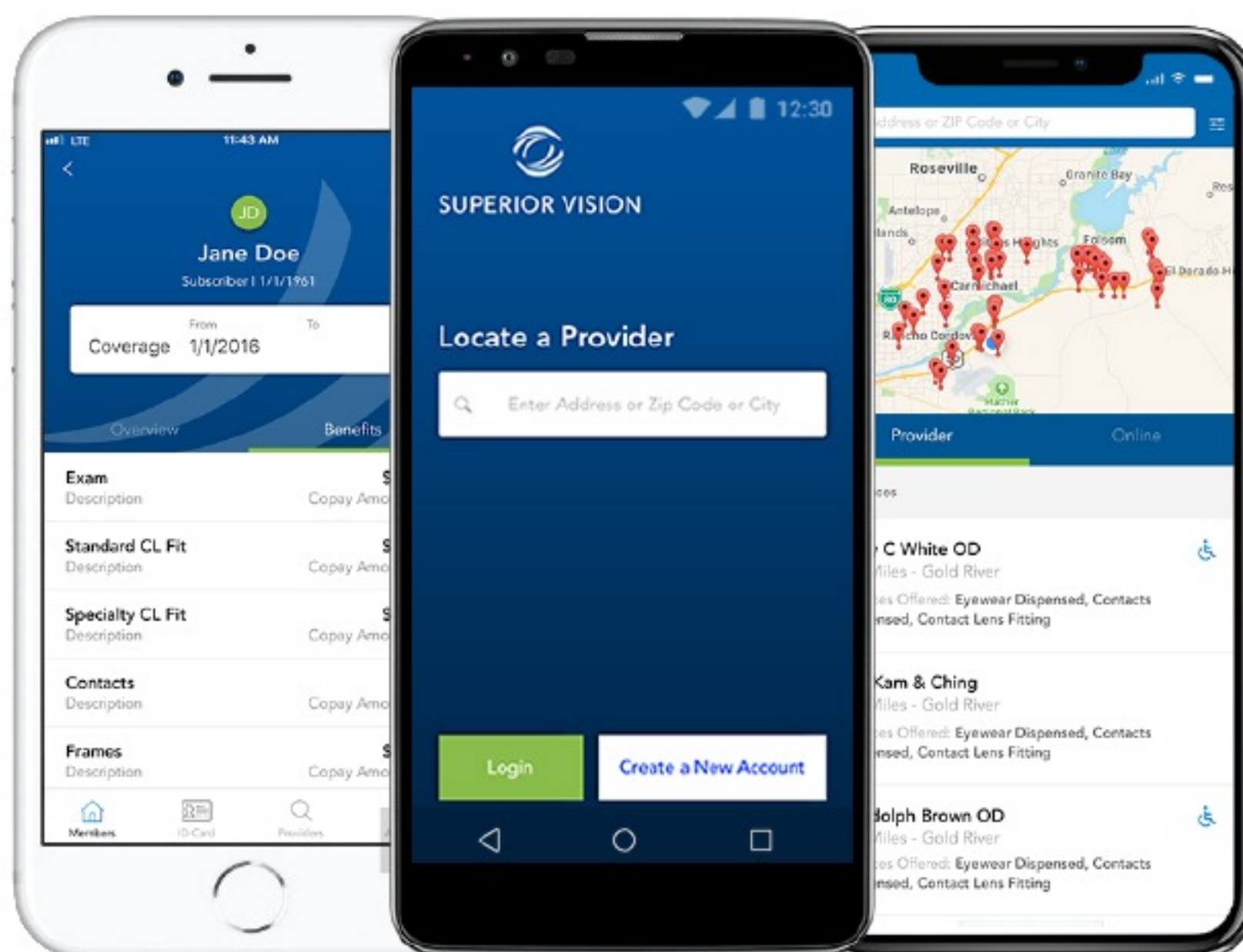
Disclaimer: All final determinations of benefits, administrative duties, and definitions are governed by the Certificate of Insurance for your vision plan. Please check with your Human Resources department if you have any questions.



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CREATE AN ONLINE ACCOUNT

Log in with the username and password you use to access your Member account on SuperiorVision.com, or you can create an account in the app.

VIEW YOUR VISION BENEFITS

- Review your vision benefits and the benefits for any dependents
- See when you are eligible for services

LOCATE A PROVIDER

- Find a provider in your network
- Get directions
- Call the provider

GET YOUR MEMBER ID CARD

- View your ID card full screen
- Print or email your ID card



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