



Vision Coverage

Your vision plan option is insured by EyeMed. The plan helps you pay for vision expenses, including routine eye exams and eye care purchases.

You can use this benefit at thousands of private practices and retail providers across the country, but your benefits are better when you use EyeMed's Access network providers. Eye exams due to medical conditions are covered under your medical plan.

The vision plan uses EyeMed's Access network. Find more detailed coverage information at benefits.lubrizol.com.



Your Vision Benefits at a Glance

FEATURE	Network Member Cost (What You Pay)	Out-of-Network Benefit (What the Plan Will Reimburse You)
Biweekly Contribution	Individual \$3.75 2-person \$6.56 Family \$10.26	
Exam with Dilation as Necessary Once every calendar year	\$0 copay	Up to \$35
Retinal Imaging	Up to \$39	\$0
Standard Contact Lens Fit and Follow-up	Up to \$55	\$0
Premium Contact Lens Fit and Follow-up	90% of retail price	\$0
Eyeglass Frames Once every calendar year	\$0 copay, 80% of charge over \$150	Up to \$75
Standard Plastic Lenses¹ Once every 12 months instead of contact lenses		
• Single vision	\$15 copay	Up to \$25
• Bifocal	\$15 copay	Up to \$40
• Trifocal	\$15 copay	Up to \$55
• Standard progressive	\$15 copay	Up to \$55
• Premium progressive	\$15 copay, 80% of charge over \$120	Up to \$55
Lens Options Paid by member and added to the base price of the lenses		
• Tint (solid and gradient)	\$15	\$0
• UV coating	\$0	Up to \$5
• Standard scratch resistance	\$0	Up to \$5
• Standard polycarbonate	\$0	Up to \$5
• Standard anti-reflective	\$45	\$0
• Polarized	80% of retail price	\$0
• Other add-ons and services	80% of retail price	\$0
Contact Lenses (Materials Only)² Once every calendar year instead of standard plastic lenses		
• Conventional	\$0 copay, 85% of charge over \$150	Up to \$120
• Disposable	\$0 copay, 100% of charge over \$150	Up to \$120
• Medically necessary ¹	\$0 copay, paid in full	Up to \$200
Lasik and PRK Vision Procedures	85% of retail price or 95% of promotional pricing; call 1-800-988-4221	\$0

¹ Plan allows the member to receive either contacts and frames, or frames and lens services.

² Contact lenses are defined as medically necessary if the patient is diagnosed with specific medical conditions where the patient's vision cannot be corrected using standard spectacle lenses. Contact EyeMed at **1-866-723-0513** for additional information.