

Vision plan benefits for City of Green Bay

You may choose from two plans: exam & materials plan, or materials only plan

Benefits through Superior Select Midwest network



Benefits

Exam
Frames
Lenses (standard) per pair
Single vision
Bifocal
Trifocal
Progressive
Lenticular
Contact lenses ²
Medically necessary contact lenses
LASIK vision correction ³

Exam & materials plan	
Deductibles	
Exam	\$0
Materials	\$0
Monthly premiums	
Emp. only	\$7.90
Emp. + limited family*	\$15.81
Emp. + family	\$20.95
Services/frequency	
Exam	12 months
Frames	24 months
Lenses	12 months
Contact lenses	12 months

Materials only plan	
Deductibles	
Exam	N/A
Materials	\$0
Monthly premiums	
Emp. only	\$5.59
Emp. + limited family*	\$11.16
Emp. + family	\$14.77
Services/frequency	
Exam	N/A
Frames	24 months
Lenses	12 months
Contact lenses	12 months

	In-network	Out-of-network
Exam	Covered in full	Up to \$35
Frames	\$125 retail allowance	Up to \$70
Lenses (standard) per pair	Covered in full	Up to \$25
Single vision	Covered in full	Up to \$40
Bifocal	Covered in full	Up to \$45
Trifocal	Covered in full	Up to \$45
Progressive	See description ¹	Up to \$45
Lenticular	Covered in full	Up to \$80
Contact lenses ²	\$150 retail allowance	Up to \$125
Medically necessary contact lenses	Covered in full	Up to \$150
LASIK vision correction ³	\$200 allowance	

	In-network	Out-of-network
Exam	N/A	N/A
Frames	\$125 retail allowance	Up to \$70
Lenses (standard) per pair	Covered in full	Up to \$25
Single vision	Covered in full	Up to \$40
Bifocal	Covered in full	Up to \$45
Trifocal	Covered in full	Up to \$45
Progressive	See description ¹	Up to \$45
Lenticular	Covered in full	Up to \$80
Contact lenses ²	\$150 retail allowance	Up to \$125
Medically necessary contact lenses	Covered in full	Up to \$150
LASIK vision correction ³	\$200 allowance	

Deductibles apply to in-network benefits only

¹Covered to provider's in-office standard retail lined trifocal amount; member pays difference between progressive and standard retail lined trifocal, plus applicable deductible

²Contact lenses and related professional services (fitting, evaluation and follow-up) are covered in lieu of eyeglass lenses and frames benefit

³Lasik Vision Correction is in lieu of eyewear benefit, subject to routine regulatory filings and certain exclusions and limitations

*Limited family – Employee and spouse or employee and child(ren)

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
Specialty contact lens fit:	10% off retail, then apply allowance

Maximum member out-of-pocket

The following options have out-of-pocket maximums⁴ on standard (not premium, brand, or progressive) lenses.

	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

⁴ Discounts and maximums may vary by lens type. Please check with your provider.

superiorvision.com

(800) 507-3800

Discounts on non-covered exam, services and materials

Exams, frames, and prescription lenses:	30% off retail
Lens options, contacts, miscellaneous options:	20% off retail
Disposable contact lenses:	10% off retail
Retinal imaging:	\$39 maximum out-of-pocket

Refractive surgery

Superior Vision has a nationwide network of independent refractive surgeons and partnerships with leading LASIK networks who offer members a discount. These discounts range from 20%-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.