

**ALCOA VISION BENEFITS**  
**BENEFIT DETAILS**  
**FOR ALCOA FLEX POPULATION, MASTER PLAN AND COBRA BENEFICIARIES**  
Subgroups 001, 002, C01, and C02

<b>Service or Product</b>	<b>Entitlement</b>	<b>Patient Responsibility</b>
Annual Eye Examination inclusive of Refraction	Included	\$0
Frame	A Designer Frame from the Davis Vision Collection covered in full, or a \$100 retail allowance for a provider-supplied frame, every other calendar year. Member is entitled to a 20% discount on the amount over \$100.	Amount over \$100, after a 20% discount
Single Vision Lenses	Members are entitled to 1 pair of spectacle lenses of standard plastic, glass, oversize, glass grey #3, post-cataract, or fashion/sun/gradient tinted, annually	\$0
Bifocal Lenses		\$0
Trifocal Lenses		\$0
Aphakic/Lenticular Lenses		\$0
Contact Lens Evaluation	Annually	\$0
Standard Contact Lenses (two lenses) (such as standard hard, or soft/daily wear spherical)	Included (in lieu of eyeglasses)	\$0
Disposable Contact Lenses	\$105 allowance toward contact lenses in the provider's private collection, annually (in lieu of eyeglasses)	Amount over \$105
Specialty Contact Lenses (two lenses) <sup>1</sup>	\$125 allowance toward contact lenses in the provider's private collection, annually (in lieu of eyeglasses)	Amount over \$125
Medically Necessary Contact Lenses	Included (prior approval required)	\$0
VISION CARE OPTIONS (tints, coatings, non-standard lens materials, etc.) - Available at a Discounted Patient Cost per pair - see below:		
Davis Vision Premier Frame (from the Collection in most providers' offices) (Blue tag)		\$25
Scratch-resistant coating		\$20
Ultraviolet coating		\$12
Photochromic (sun-sensitive) glass lenses		\$20
Blended segment (invisible bifocal) lenses		\$20
Progressive addition lenses (PAL) – Standard type <sup>2</sup>		\$50
Progressive addition lenses (PAL) – Premium type <sup>2</sup>		\$90
Anti-reflective coating (ARC) –Standard type		\$35
Anti-reflective coating (ARC) – Premium type		\$48
Anti-reflective coating (ARC) – Ultra type		\$60
Polycarbonate lenses <sup>3</sup>		\$30
Polarized lenses		\$75
High index (thinner and lighter lens material)		\$55
Intermediate vision lenses		\$30
Photosensitive plastic lenses		\$65
<b>Out-of-Network Reimbursement</b>		
Examination		\$35
Frame		\$30
Spectacle lenses – single vision (per pair)		\$35
Spectacle lenses – bifocal (per pair)		\$51
Spectacle lenses – trifocal (per pair)		\$68
Spectacle lenses – lenticular (per pair)		\$80
Contact lenses – evaluation and fitting		\$35
Contact lenses – daily wear/disposables		\$68
Contact lenses – specialty		\$105
Contact lenses – medically necessary (prior approval required)		\$210

<b>Value-Added Benefits</b>	
Lens 1-2-3! <sup>®</sup> mail order replacement contact lens program	Included
Laser Vision Correction discount <sup>/4</sup>	Included
Low Vision coverage <sup>/5</sup>	Included
<b>Additional Plan Specifications:</b>	
<ul style="list-style-type: none"> <li>• Refraction-only claims will be processed as examination claims and will exhaust exam eligibility. In such cases, the refraction (offered alone) will be covered in place of the exam inclusive of refraction.</li> <li>• Prescription safety glasses are eligible in lieu of dress benefit when prescribed for wear other than work.</li> <li>• If general standards are met, an additional pair of spectacle lenses or contact lenses is eligible within the same calendar year; there is no additional benefit for an exam or frame when the general standard is met</li> </ul>	
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- <sup>1/</sup> Can be applied toward specialty contacts (including but not limited to extended wear, hard/soft bifocal, and gas permeable).
- <sup>2/</sup> If patient is unable to adapt to progressive lenses, conventional bifocals will be provided. However, the copayment will not be refunded.
- <sup>3/</sup> There is no copayment for members under age 19, or for patients with prescriptions of +/- 6.00 or greater, or if prescribed for monocular patients.
- <sup>4/</sup> Members will be entitled to savings of up to 25% off the provider's usual and customary fees, or a 5% discount on any advertised special.
- <sup>5/</sup> Davis Vision's standard plan for Low Vision will be included: one comprehensive low vision examination every 5 years up to a maximum charge of \$300, maximum Low Vision Aid allowance of \$600 with a lifetime maximum of \$1200, and follow-up care including four visits in any 5 year period with a maximum charge of \$100 for each visit