aetna®

Summary of Benefits

Aetna Vision℠ Preferred E100 24M		
Plan ID 1054512201 TPID 79007 Line Value 863	Member cost In-Network	Out of Network*
Vision Care Services	**Aetna Vision Network**	
Eye Exam with Dilation as necessary	$20 Copay	$20 Reimbursement
Standard Contact Lens Fit/Follow-Up	Member pays discounted fee of $40	Not Covered
Premium Contact Lens Fit/Follow-Up	10% off retail price	Not Covered
Retinal Imaging	Member pays discounted fee of $39	Not Covered
Standard Plastic Single Vision Lenses	$25 Copay	$10 Reimbursement
Standard Plastic Bifocal Vision Lenses	$25 Copay	$25 Reimbursement
Standard Plastic Trifocal Vision Lenses	$25 Copay	$55 Reimbursement
Standard Plastic Lenticular Vision Lenses	$25 Copay	$55 Reimbursement
Standard Progressive Vision Lenses[1]	$90 Copay	$25 Reimbursement
Premium Progressive Vision Lenses[1] (Tier amount based on brand)	Tier 1 = $110 Copay Tier 2 = $120 Copay Tier 3 = $135 Copay	$25 Reimbursement
Other Premium Progressive Lenses[1]	$90 Copay, 20% off retail price less $120 allowance	$25 Reimbursement
UV Treatment	Member pays discounted fee of $15	Not Covered
Tint (Solid And Gradient)	Member pays discounted fee of $15	Not Covered
Standard Plastic Scratch Coating	Member pays discounted fee of $15	Not Covered
Standard Polycarbonate Lenses - Adult	Member pays discounted fee of $40	Not Covered
Standard Polycarbonate Lenses - Kids under age 19	Member pays discounted fee of $40	Not Covered
Standard Anti-Reflective Coating[1]	Member pays discounted fee of $45	Not Covered
Premium Anti-Reflective Coating[1] (Tier amount based on brand)	Tier 1 Member pays discounted fee of$57 Tier 2 Member pays discounted fee of $68 Tier 3 20% discount off retail price	Not Covered
Photochromic/Transitions Plastic	Member pays discounted fee of $75	Not Covered
Polarized And Other Lens Add Ons	20% off retail price	Not Covered
Conventional Contact Lenses	$100 Allowance** *Additional 15% off balance over $100*	$69 Reimbursement
Disposable Contact Lenses	$100 Allowance	$80 Reimbursement
Medically Necessary Contact Lenses	$0 Copay	$200 Reimbursement
Frame	$100 Allowance** *Additional 20% off balance over $100*	$50 Reimbursement
Frequency: Exam Eyeglass Lenses or Contact Lenses Frame	 Once every 12 rolling months Once every 12 rolling months Once every 24 rolling months	
In-Network Discounts		
Additional pairs of eyeglasses or prescription sunglasses[2]	Up to a 40% discount off retail price	
Non-covered items[3]	20% discount off retail price	
Lasik Laser vision correction or PRK from U.S. Laser Network[4] only. Call 1-800-422-6600	15% discount off retail or 5% discount off the promotional price	

Partial list of Exclusions and Limitations

Exclusions and limitations for vision include: any charges in excess of the benefits, dollar or supply limits listed above; special vision procedures, such as orthoptics, vision therapy or vision training; vision services or supplies that do not meet professionally accepted standards; plano (non-prescription) lenses; non-prescription sunglasses; two pair of glasses in lieu of bifocals; medical and/or surgical treatment of the eyes; cosmetic services; lost or broken lenses, frames, glasses or contact lenses. Other exclusions and limitations may also apply.

*You can choose to receive care outside the network. Simply pay for the services up front and then submit a claim form to receive an amount up to the out of network reimbursement amounts listed above. Reimbursement will not exceed the providers actual charge.
Claim forms can be found at AetnaVision.com or by calling customer service at 1-877-973-3238.
Submit completed claim form with receipts to Aetna, PO Box 8504 Mason, OH 45040-7111.
Enrolled members can access our secure member website once their plan becomes effective. Enrolled subscribers will receive a welcome packet with ID card mailed to their home within 15 business days after enrollment is processed.

**Allowances are one-time use benefits. No remaining balances may be used. The plan does not provide a declining balance benefit.

[1]Premium progressives and premium anti-reflective Brand designations are subject to annual review and change based on market conditions. Ask your eye care provider for more information.

[2]Additional pair discount applies to purchases made after the plan allowances have been exhausted.

[3]Non covered discounts may not be available in all states.

[4]Lasik or PRK from the US Laser Network, owned and operated by LCA Vision.

Vision insurance plans are underwritten by Aetna Life Insurance Company (Aetna). Certain claims administration services are provided by First American Administrators, Inc. and certain network administration services are provided through EyeMed Vision Care (“EyeMed”), LLC.

Not all services are covered. See plan documents for a complete description of benefits, exclusions and limitations of coverage. Plan features and availability may vary by location and are subject to change.

Providers in the Aetna Vision network are contracted and credentialed through EyeMed Vision Care, LLC according to EyeMed’s requirements. EyeMed and Aetna are independent contractors and not agents of each other. Provider participation may change without notice.

Refer to Aetna.com for more information about Aetna® plans.

Policy forms issued in Idaho include: AL HGrpPol-Vision 03
Policy forms issued in Missouri include: AL HGrpPol-Vision 02
Policy forms issued in Oklahoma include: AL HGrpPol-Vision 02

TTY: **711**

English	**To access language services at no cost to you, call** 1-888-982-3862 **.**
Amharic	እርስዎ ወጪ ሳያወጡ የቋንቋ አገልግሎቶችን ለመድረስ ወደ 1-888-982-3862 ይደውሉ።
Arabic	للحصول على خدمات اللغة مجانًا، اتصل على 1-888-982-3862
Armenian	Անվճար լեզվական ծառայություններից օգտվելու համար զանգահարեք հեռախոսահամարով: 1-888-982-3862
Carolinian (Kapasal Falawasch)	ngere aukke ghut alillis reel kapasal Falawasch au fafaingi tilifon ye 1-888-982-3862 .
Chamorro	Para un hago' i setbision lengguåhi ni dibåtde para hågu, ågang 1-888-982-3862 .
Chinese Traditional	如欲使用免費語言服務，請致電 1-888-982-3862 .
Cushitic-Oromo	Tajaajila afaanii bilisaan argachuuf, 1-888-982-3862 irratti bilbilaa.
French	Afin d'accéder aux services langagiers sans frais, composez le 1-888-982-3862 .
French Creole (Haitian)	Pou w jwenn aksè ak sèvis lang gratis pou ou, rele 1-888-982-3862 .
German	Um kostenlos auf Sprachdienste zuzugreifen, rufen Sie 1-888-982-3862 an.
Greek	Για να επικοινωνήσετε χωρίς χρέωση με το κέντρο υποστήριξης πελατών στη γλώσσα σας, τηλεφωνήστε στον αριθμό 1-888-982-3862 .
Gujarati	તમારે કોઇ તના ખર્ચ વના ભાષાની સેવાઓની પહચ માટે, કોલ કરો 1-888-982-3862 .
Hindi	आपके लए बना कसी कमत के भाषा सेवाआ का उपयोग करने के लए, 1-888-982-3862 पर कॉल करे।
Hmong	Xav tau kev pab txhais lus tsis muaj nqi them rau koj, hu 1-888-982-3862 .
Italian	Per accedere ai servizi linguistici, senza alcun costo per lei, chiami il numero 1-888-982-3862 .
Japanese	無料の言語サービスをご利用いただくには、1-888-982-3862 にお電話ください。
Karen	လၢကမၤန့ၢ် ကျိာ်တၢ်မၤစၢၤတၢ်မၤ လၢတလိၣ်လၢာ်ဘူၣ်လၢာ်စ့ၢ လၢနကိးအကိး, 1-888-982-3862 .
Korean	무료로 언어 서비스를 이용하려면 1-888-982-3862 번으로 전화하세요
Laotian	ເພື່ອເຂົ້າເຖິງການບໍລິການພາສາໂດຍບເສຍຄ່າໃຊ້ຈ່າຍໃດໆແກ່ທ່ານ, ໃຫ້ໂທຫາ 1-888-982-3862 .
Mon-Khmer, Cambodian	ដើម្បីទទួលនេសវាផ្នែកភាសាដោយមិនគិតថ្លៃពីអ្នកសូមទូរសព្ទទេលខ 1-888-982-3862 ។
Navajo	T'áá ni nizaad k'ehjí bee níká a'doowoł doo bááh ílínígóó kojį' hólne' 1-888-982-3862 .
Pennsylvanian-Dutch	Um Schprooch Services zu griege mitaus Koscht, ruff 1-888-982-3862 .
Persian-Farsi	برای دسترسی به خدمات زبان به طور رایگان، با شماره 1-888-982-3862 تماس بگیرید.
Polish	Aby uzyskać bezpłatny dostęp do usług językowych, zadzwoń pod numer 1-888-982-3862 .
Portuguese	Ligue para 1-888-982-3862 para receber assistência linguística gratuita.
Punjabi	ਤੁਹਾਡੇ ਲਈ ਬਿਨਾਂ ਕਿਸੇ ਕੀਮਤ ਵਾਲੀਆਂ ਭਾਸ਼ਾ ਸੇਵਾਵਾਂ ਦੀ ਵਰਤੋਂ ਕਰਨ ਲਈ, 1-888-982-3862 'ਤੇ ਫ਼ੋਨ ਕਰੋ।
Russian	Чтобы получить бесплатные языковые услуги, позвоните по номеру 1-888-982-3862 .
Samoan	Mo le mauaina o auaunaga tau gagana e aunoa ma se totogi, vala'au le 1-888-982-3862 .
Serbo-Croatian	Za besplatne prevodilačke usluge pozovite 1-888-982-3862 .
Spanish	Para acceder a los servicios de idiomas sin costo, llame al 1-888-982-3862 .
Syriac-Assyrian	ܡܛܠ ܕܬܡܛܐ ܠܚܕܡܬܐ ܕܠܫܢܐ ܡܓܢ ܩܪܝ: ܠܡܢܝܢܐ 1-888-982-3862 .
Tagalog	Upang ma-access ang mga serbisyo sa wika nang wala kang babayaran, tumawag sa 1-888-982-3862 .
Thai	หากท่านต้องการเข้าถึงการบริการทางด้านภาษาโดยไม่มีค่าใช้จ่าย โปรดโทร 1-888-982-3862 .
Ukrainian	Щоб отримати безкоштовний доступ до мовних послуг, задзвоніть за номером 1-888-982-3862 .
Vietnamese	Nếu quý vị muốn sử dụng miễn phí các dịch vụ ngôn ngữ, hãy gọi tới số 1-888-982-3862 .