

# EyeMed

VISION CARE<sup>SM</sup>

The discount plan provides significant savings to you on eye care and eyewear. By showing your Delta Dental ID card to any EyeMed provider, you can obtain your discount. You can choose from a nationwide network of optometrists, ophthalmologists and opticians, as well as the nation's leading optical retailers such as LensCrafters, Sears Optical, Target Optical and most Pearle Vision locations.

<i>Vision Care Services</i>	<i>Member Benefit</i>
<i>Exam with Dilation as Necessary:</i>	\$5 off comprehensive exam \$10 off contact lens exam
<b>Frames:</b> Any frame available at provider location	30% off retail price
<b>Complete Pair Glasses Purchased:</b> <ul style="list-style-type: none"> <li>• The following frame, lenses, and lens options discounts &amp; fees apply only if a complete pair is purchased in the same transaction.</li> <li>• Items purchased separately will be discounted 20% off of the retail price.</li> </ul>	
<b>Standard Plastic Lenses including Standard Scratch:</b> Single Vision Bifocal Trifocal	\$75 \$95 \$125
<b>Lens Options:</b> UV Coating Tint (Solid and Gradient) Standard Polycarbonate Standard Anti-Reflective Coating Standard Progressive (Add-on to Bifocal)	\$15 \$15 \$40 \$45 \$70
<b>Conventional Contact Lenses<sup>1</sup>:</b> (Applied to materials only)	15% off retail price
<b>Laser Vision Correction:</b> LASIK or PRK	15% off retail price or 5% off promotional price
<b>Frequency:</b> Exam, Frame, Lenses and Contact Lenses	Unlimited

- After initial purchase, replacement contact lenses may be obtained via the Internet at substantial savings and mailed directly to the member. Details are available at [www.eyemedvisioncare.com/deltadental](http://www.eyemedvisioncare.com/deltadental). Member will receive 20% discount on items purchased at participating Providers not included under the plan coverage. 20% discount may not be combined with any other discounts or promotional offers, and the discount does not apply to EyeMed provider's professional services, or contact lenses. Retail prices may vary by location. Not valid for groups domiciled in the state of Washington.

#### Plan Limitations/Exclusions

- Orthoptic or vision training, subnormal vision aids, and any associated supplemental testing
- Medical and/or surgical treatment of the eye, eyes, or supporting structures
- Corrective eyewear required by an employer as a condition of employment, and safety eyewear unless specifically covered under plan.
- Services provided as a result of any Worker's Compensation law
- Plano non-prescription lenses and non-prescription sunglasses (except for 20% discount)

**For more information, visit our website at [www.eyemedvisioncare.com/deltadental](http://www.eyemedvisioncare.com/deltadental)  
or by  
calling toll free: 866-246-9041**