



## Employee Benefits - Vision Plan Summary

Effective 7/1/26 - This Document is a summary of coverage only. The MMIA Employee Benefits Program Plan Documents are available at [mmiaeb.net](http://mmiaeb.net) and must be referenced for details of all coverages.

Benefit Period (July 1 - June 30)

Benefits Every 12 Months	In-Network	Out-of-Network
Well Vision Exam	\$20 Copay (no more than \$39 copay for retinal screenings as an enhancement to an exam)	Up to \$50
Frames	\$165 allowance at Costco, Walmart, and retail 20% saving after allowance	Up to \$70
Lenses (included with exam copay)	Single vision, lined bifocal, and trifocal lenses Polycarbonate for children	Single vision - Up to \$50
Lens Enhancements	Standard progressive: \$0 copay Premium progressive: \$80-\$90 copay Custom progressive: \$120-\$160 copay	Lined bifocal - Up to \$75 Lined trifocal - Up to \$100
Contacts (instead of glasses)	\$150 allowance for contact lenses Up to \$60 for contact lens exam (fitting and evaluation)	Up to \$105
<b>Laser Vision Correction Discount</b>	<i>Average 15% off regular price or 5% off promotional price; discounts only available from contracted facilities</i>	