# MOUNT VERNON NAZARENE UNIVERSITY

# A VOLUNTARY VISION PROGRAM



## Who is eligible for the Voluntary Vision Plan?

Employees of the Mount Vernon Nazarene University who are budgeted to work thirty (30) hours or more per week are eligible for this program. Employees who enroll may enroll their eligible dependents. Payment of a premium by the employee is required for the employee and dependent coverage.

## What are the benefits?

- **Providers:** You can go to any Optician, Optometrist or Ophthalmologist. Providers will be paid the Usual and Customary rate for covered items.
- **Coverage Period:** The coverage period will be every calendar year. The items below will be paid based upon this period.
- Eye examinations: One comprehensive vision examination is covered per calendar year with a \$15.00 copay.
- Lenses: One pair of basic corrective lenses will be covered. Basic lenses are
  understood to mean one of pair of single vision, bifocal or trifocal lenses in glass or
  plastic with no lens extras. Progressive lenses have a maximum payment of
  \$113.00.
- Frames: There is an allowance of \$75.00 toward the retail cost of a frame.
- Contact Lenses: In lieu of eyeglasses, medically necessary contact lenses are paid with Usual and Customary rates. Cosmetic lenses have an allowance of \$100.00.

### What are the Non-Covered Extras?

- Anti-reflective Coating
- High Index
- Photochromic
- Rimless
- Solid. Sun and Gradient Tints

- Edge/Roll Polish
- Oversize Lenses
- Polycarbonate
- Scratch Resistant Coatings
- Ultraviolet Coating

# What are the Monthly Premiums?

Employee: \$8.50 Employee + One: \$14.44 Family: \$18.42

#### For More Information:

Contact the Mount Vernon Nazarene University Human Resources Department with any questions. Enrollment forms, claim forms, and the full plan document are on the employer's website.

