

Cypress Group Vision Plans

For Employer Groups of 2 or More Employees

Plan Summary



In-Network Benefits		Designer Vision Plan Options			
Frequency – Once Every:		Option I		Option II	
Eye Examination inclusive of Dilation (when professionally indicated)		12 Months		12 Months	
Spectacle Lenses		12 Months		12 Months	
Frame		12 Months		24 Months	
Contact Lens Evaluation, Fitting & Follow-Up Care		12 Months		12 Months	
Contact Lenses (in lieu of eyeglasses)		12 Months		12 Months	
Copayments		Alt.A	Alt.B	Alt.A	Alt.B
Eye Examination		\$ 0	\$ 10	\$ 0	\$ 10
Spectacle Lenses		\$ 10	\$ 20	\$ 10	\$ 20
Contact Lens Evaluation, Fitting & Follow-Up Care		\$ 0	\$ 0	\$ 0	\$ 0
Eyeglass Benefit - Frame		Average Retail Value			
Non-Collection Frame Allowance (Retail):		Up to \$130		Up to \$130 Plus a 20% discount on any overage	
Davis Vision Frame Collection (in lieu of Allowance):					
Fashion level		Up to \$125		Included	
Designer level		Up to \$175		Included	
Premier level		Up to \$225		\$25 copayment	
Eyeglass Benefit - Spectacle Lenses		Average Retail Value		Member Charges	
Clear plastic single-vision, lined bifocal or trifocal lenses (any Rx)		\$60-\$120		Included	
Oversize Lenses		\$20		Included	
Tinting of Plastic Lenses		\$20		Included	
Scratch-Resistant Coating		\$25-\$40		Included	
Polycarbonate Lenses		\$60-\$75		\$0 or \$30	
Ultraviolet Coating		\$25-\$30		\$12	
Standard Anti-Reflective (AR) Coating		\$50-\$70		\$35	
Premium AR Coating		\$65-\$90		\$48	
Ultra AR Coating		\$100-\$125		\$60	
Standard Progressive Lenses		\$150-\$195		\$50	
Premium Progressives (Varilux®, etc.)		\$195-\$300		\$90	
Intermediate-Vision Lenses		\$150-\$175		\$30	
High-Index Lenses		\$90-\$150		\$55	
Polarized Lenses		\$95-\$110		\$75	
Plastic Photosensitive Lenses		\$95-\$150		\$65	
Scratch Protection Plan: Single Vision Multifocal Lenses				\$20/\$40	
Contact Lens Benefit (in lieu of eyeglasses)					
Non-Collection Contact Lenses: Materials Allowance		Up to \$130 Plus a 15% discount on any overage			
- Evaluation, Fitting & Follow-Up Care – Standard Lens Types		Included			
- Evaluation, Fitting & Follow-Up Care – Specialty Lens Types		Up to \$60 allowance Plus a 15% discount on any overage			
Collection Contact Lenses (in lieu of Allowance): Materials					
- Disposable		4 boxes/multi-packs			
- Planned Replacement		2 boxes/multi-packs			
- Evaluation, Fitting & Follow-up Care		Included			
Medically Necessary Contact Lenses (with prior approval)					
- Materials, Evaluation, Fitting & Follow-Up Care		Included			
Out-of-Network Reimbursement Schedule: up to					
Eye Examination: \$30	Single Vision Lenses: \$25	Trifocal Lenses: \$45	Elective Contact Lenses: \$75		
Frame: \$30	Bifocal Lenses: \$35	Lenticular Lenses: \$60	Medically Necessary CL: \$225		