

Clayton BOE August 1, 2023 Vision Plan

Carrier			VSP - Option	
		In-Network	Out-of-Network	
Exam Copay		\$10	Reimbursed up to \$45	
Frame / Lense Copay		\$25	n/a	
Allowances				
Frame Allowance		\$150*	Reimbursed up to \$70	
Contact Lens Allowance		\$150* in lieu lenses & frames	Reimbursed up to \$105 in lieu lenses & frames	
Frequency Limit				
Eye Exam		12 Months	12 Months	
Lenses		12 Months	12 Months	
Frames		24 Months	24 Months	
Contact Lenses		12 Months in lieu lenses & frames	12 Months in lieu lenses & frames	
Lenses				
Single Vision		100% after \$25 copay	Reimbursed up to \$30	
Lined Bifocal			Reimbursed up to \$50	
Lined Trifocal			Reimbursed up to \$65	
Lenticular			Reimbursed up to \$100	
Standard Progressive			Reimbursed up to \$50	
Lense Enhancements				
Premium Progressive Lenses		\$95 - \$105	n/a	
Custom Progressive Lenses		\$150 - \$175		
Photochromic Lenses		\$75		
Polycarbonate Lenses		\$31 - \$35 (\$0 for children)		
Scratch Resistant Coating		\$17		
UV Protection		\$16		

*Costco frame allowance is \$70.