

Vision benefits never
looked so good



Lansing Community College

WELCOME TO HERITAGE
VISION PLANS!

Vision Benefits Made Easy

- No complicated procedures or forms to complete. When scheduling your appointment, tell the provider you have Heritage Vision, no ID card is required.

Visit us at

**www.heritagevisionplans.com or call
800.252.2053**

- Once your plan becomes active you may login to review benefit information or locate a provider. When you visit a Heritage Provider, you maximize your vision benefits and receive valuable preferred pricing discounts on non-covered lens options, additional eyewear purchases and LASIK services.

More Choices in Eyewear

- Whether you are looking for evening and weekend availability, or are more focused on fashion or value, we have the provider that is right for you.

Lansing Community College

BENEFIT SUMMARY

Frequency is once every plan year (January 1st – December 31st)

SERVICES	NETWORK COVERAGE	OUT OF NETWORK REIMBURSEMENT ⁵
Comprehensive Eye Exam Does not apply to contact lens fit	100% Covered, \$6.50 Co-Pay	Reimbursed up to \$38.00
Frames	\$130.00 Retail Allowance Member pays retails frame costs over \$130.00, less 20% discount on balance over \$130.00 ² Wal-Mart/Sam's EDLP Frames Level 3 (\$75.00) ³	Reimbursed up to \$45.00
Standard Plastic Lenses (Pair): Choice of One		
Single Vision	100% Covered, \$18.00 Co-Pay	Reimbursed up to \$30.00
Bifocal	100% Covered, \$18.00 Co-Pay	Reimbursed up to \$50.00
Trifocal	100% Covered, \$18.00 Co-Pay	Reimbursed up to \$65.00
Standard Progressive	100% Covered, \$75.00 Co-Pay ⁴	Reimbursed up to \$65.00
Lens Options:		
Tint Solid, Gradient, Sun	100% Covered, No Co-Pay	N/A
UV Protection	100% Covered, No Co-Pay	N/A
Other Lens Options: Thinner Lenses • Transitions • Scratch Resistant Coating • Anti-Reflective Coating • Polarized • Etc.	20% Discount Granted for lens options not covered by the plan	N/A
Contact Lenses: In lieu of eyeglasses¹		
Standard Contact Fitting	100% Covered, \$40.00 Co-Pay	N/A
Premium Contact Fitting	10% Discount²	N/A
Elective	\$130.00 Retail Allowance Member pays retails frame costs over \$130.00	Reimbursed up to \$105.00
Medically Necessary Prior Approval Required	100% Covered, \$18.00 Co-Pay Covered up to U&C Amount	Reimbursed up to \$210.00

¹You are eligible for contact lenses OR eyeglasses, not both, in any plan year.

²Preferred pricing discounts may not be available for certain frame brands as determined by the manufacturer or where prohibited by law.

³If you choose to receive services at Walmart Vision Centers or Sam's Club Optical locations, please note that the "Everyday Low Price" (EDLP) frame benefit level differs from other providers in the network. Additionally, due to Walmart's heavily discounted prices, there are no added preferred pricing discounts on non-covered upgrades, options, fitting fees, or additional prescription eyeglass or sunglass purchases at these locations. Please keep this in mind as you select a network provider.

⁴If you choose a Premium, Ultra or Custom Progressive lens, you are responsible for the co-pay, plus 80% of the difference between the standard and chosen progressive type.

⁵If you use the services of an in-network provider but take advantage of a sale, coupon, or other in-store special, the provider may require that you pay in full and submit your itemized receipt for reimbursement at the out-of-network reimbursement rates.



20% off additional pairs at any network provider with initial purchase



15% Off LASIK available through the LCA-Vision Network

This is intended as an easy-to-read summary and provides a general overview of your benefits. It is not a contract. Exclusions and limitations may apply. To find a Heritage Vision Provider, please call **800.252.2053** or log on to the Heritage Website at heritagevisionplans.com.