



ENV RETIREE VISION CO-OP

A comprehensive eye exam can provide early detection of vision problems as well as systemic diseases such as diabetes, high cholesterol and other conditions in addition to common eye disorders. ENV Insurance Agency is proud to offer a Retiree Vision Co-Op to ensure your golden years are your brightest yet.

Plan Code	Frequency	Co-Pays	Frame Allowance
Blue	12/12/12	\$10/\$0/\$0	\$140 / \$190 at VisionWorks or Frame Collection *
Orange	12/24/24	\$15/\$0/\$0	\$120 / \$170 at VisionWorks or Frame Collection **

Plan Code	Monthly Rate		
	EE	EE + 1	EE + Family
Blue	\$7.13	\$13.55	\$20.83
Orange	\$5.06	\$9.62	\$14.79

* Davis Vision Frame Collection Blue Plan

Fashion	Included
Designer	Included
Premier	Included

** Davis Vision Frame Collection Orange Plan

Fashion	Included
Designer	\$15 Copay
Premier	\$40 Copay

**Broad array of paid
in full coverage**

**Low member out of
pocket cost**

**One Year
Breakage Warranty**

**Up to a 50%
Discount on
additional pairs of
glasses**

**Standard Scratch
Resistant Coating
on plastic lenses
free of charge**

ENV INSURANCE AGENCY

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	BLUE	ORANGE
Frequency - Once Every		
Eye Examination inclusive of Dilation (when professionally indicated)	12 Months	12 months
Spectacle Lenses	12 Months	24 Months
Frames	12 Months	24 Months
Contract Lens Evaluation, Fitting & Follow-Up Care (in lieu of eyeglasses)	12 Months	24 Months
Contact Lenses (in lieu of eyeglasses)	12 Months	24 Months
Copayments		
Eye Examination	\$10 copay	\$15 copay
Spectacle Lenses	\$0 copay	\$0 copay
Contract Lens Evaluation, Fitting & Follow-Up Care (in lieu of eyeglasses)	\$0 copay	\$0 copay
Eyeglass Benefit - Frame		
Non-Collection Frame Allowance (Plus a 20% Discount on any overage)	Up to \$140 or Up to \$190 at VisionWorks	Up to \$120 or Up to \$170 at VisionWorks
Davis Vision Frame Collection (in lieu of Allowance)		
Fashion level	\$0 copay	\$0 copay
Designer level	\$0 copay	\$15 copay
Premier level	\$0 copay	\$40 copay
Eyeglass Benefit - Spectacle Lenses		
Clear plastic single-vision, bifocal, trifocal or lenticular lenses	\$0 copay	\$0 copay
Tinting of Plastic Lenses	\$0 copay	\$15 copay
Scratch-Resistant Coating	\$0 copay	\$0 copay
Polycarbonate Lenses (Children / Adults)	\$0/\$30 copay	\$0/\$35 copay
Ultraviolet Coating	\$12 copay	\$15 copay
Anti-Reflective (AR) Coating (Standard / Premium / Ultra)	\$35/\$48/\$60 copay	\$40/\$55/\$69 copay
Progressive Lenses (Standard / Premium / Ultra)	\$50/\$90/\$140 copay	\$65/\$105/\$140 copay
High-Index Lenses	\$55 copay	\$60 copay
Polarized Lenses	\$75 copay	\$75 copay
Plastic Photochromic Lenses	\$65 copay	\$70 copay
Scratch Protection Plan: Single Vision / Multifocal Lenses	\$20/\$40 copay	\$20/\$40 copay
Contact Lens Benefit		
Non-Collection Contact Allowance	Up to \$140	Up to \$120
Davis Vision Contact Collection	Disposables 4 boxes; Replacements 2 boxes	Up to \$120
Non-Collection Evaluation, Fitting & Follow-Up Care - All Lens Types	15% Discount	15% Discount
Collection Evaluation, Fitting & Follow-Up Care - All Lens Types	\$0 copay	15% Discount
Medically Necessary Lenses, Evaluation, Fitting & Follow-Up Care	\$0 copay	\$0 copay
Out-of-Network Reimbursement Schedule (Up to the below allowances)		
Eye Examination	\$40	\$40
Single Vision Lenses	\$40	\$40
Bifocal/Progressive Lenses	\$60	\$60
Trifocal Lenses	\$80	\$80
Lenticular Lenses	\$100	\$100
Frames	\$50	\$50
Elective Contact Lenses	\$105	\$80
Medically Necessary Contact Lenses	\$225	\$225

Plans include a One-Year Breakage Warranty

Once enrolled must remain on plan for 12 months, if you term at any point reenrollment not allowed