

## DeltaVision 150

The DeltaVision 150 plan offers the same great benefits and perks of the DeltaVision 130 plan, plus more—featuring a \$150 allowance for frames or elective contact lenses.

Exam/Lens/Frame frequency (months)	12/12/24
Contacts (Instead of glasses) frequency (months)	12
In Network Coverage	
Exam Co-pay	\$10
Materials Co-pay	\$25
Single vision, lined bifocal, lined trifocal or lenticular lenses	Covered in full after co-pay
Frames allowance	\$150
Elective contact lenses allowance	\$150
Necessary contact lenses	Covered in full after co-pay
Contact lens fit and evaluation copay	Up to \$60
Rates	
Employee only	\$6.55
Employee + spouse	\$13.09
Employee + child(ren)	\$14.01
Employee + spouse + child(ren)	\$22.38