

Vision Benefits: Superior Vision by MetLife



Healthy eyes and clear vision are an important part of your overall health and quality of life. You can enroll yourself and your eligible dependents in our vision benefits plan. Also, you do not have to enroll in medical coverage to elect the vision plan.

To find a network provider, visit www.metlife.com, click “Find a Vision Provider,” then click “Superior Vision by MetLife.”

View a full list of covered vision services by clicking [here](#).



PLAN HIGHLIGHTS		
NETWORK	METLIFE NETWORK	OUT-OF-NETWORK
	YOU PAY	REIMBURSEMENT
VISION EXAM – EVERY 12 MONTHS		
Exam	\$15 Copay	Ophthalmologist: Up to \$42, Optometrist: Up to \$37
LENSES – EVERY 12 MONTHS		
Single Lenses	\$15 Copay	Up to \$26
Bifocal Lenses	\$15 Copay	Up to \$34
Trifocal Lenses	\$15 Copay	Up to \$50
FRAMES – EVERY 24 MONTHS		
Frames	\$15 Copay, \$125 Allowance	Up to \$50
CONTACTS – EVERY 12 MONTHS (IN LIEU OF LENSES & FRAMES)		
Medically Necessary Contacts	\$0	Up to \$210
Elective Contacts	\$120 Allowance	Up to \$100

The above information is a summary only. Please refer to your Certificate of Coverage for complete details of Plan benefits, limitations and exclusions.

VISION PLAN COST	BIWEEKLY	WEEKLY
Employee Only	\$2.93	\$1.47
Employee and Spouse	\$4.36	\$2.18
Employee and Child(ren)	\$4.66	\$2.33
Employee and Family	\$7.45	\$3.73