



VISION BENEFITS FROM EMBLEMHEALTH

In-network member costs	PLAN A	PLAN B	PLAN C	PLAN D	PLAN E	PLAN F	PLAN G	PLAN H
Exam								
Exam with dilation as necessary	\$0 co-pay	\$0 co-pay	\$10 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay	\$10 co-pay	\$10 co-pay
Contact lens exam options								
Standard contact lens fit and follow-up	Up to \$40	Up to \$40	Up to \$40	Up to \$40	Up to \$40	Up to \$40	Up to \$40	Up to \$40
Frames								
Any available frame at provider location	\$0 co-pay / \$200 allowance 20% off balance over \$200	\$0 co-pay / \$150 allowance 20% off balance over \$150	\$0 co-pay / \$130 allowance 20% off balance over \$130	\$0 co-pay / \$100 allowance 20% off balance over \$100	\$0 co-pay / \$200 allowance 20% off balance over \$200	\$0 co-pay / \$150 allowance 20% off balance over \$150	\$0 co-pay / \$130 allowance 20% off balance over \$130	\$0 co-pay / \$130 allowance 20% off balance over \$130
Standard plastic lenses								
Single vision	\$0 co-pay	\$0 co-pay	\$10 co-pay	\$20 co-pay	\$0 co-pay	\$0 co-pay	\$10 co-pay	\$25 co-pay
Bifocal	\$0 co-pay	\$0 co-pay	\$10 co-pay	\$20 co-pay	\$0 co-pay	\$0 co-pay	\$10 co-pay	\$25 co-pay
Trifocal	\$0 co-pay	\$0 co-pay	\$10 co-pay	\$20 co-pay	\$0 co-pay	\$0 co-pay	\$10 co-pay	\$25 co-pay
Standard progressive lens	\$65 co-pay	\$65 co-pay	\$75 co-pay	\$85 co-pay	\$65 co-pay	\$65 co-pay	\$75 co-pay	\$90 co-pay
Premium progressive lens	\$65 co-pay, 80% of charge less \$120 allowance	\$65 co-pay, 80% of charge less \$120 allowance	\$75 co-pay, 80% of charge less \$120 allowance	\$85 co-pay, 80% of charge less \$120 allowance	\$65 co-pay, 80% of charge less \$120 allowance	\$65 co-pay, 80% of charge less \$120 allowance	\$75 co-pay, 80% of charge less \$120 allowance	\$90 co-pay, 80% of charge less \$120 allowance
Lens options								
UV treatment	\$15 co-pay	\$15 co-pay	\$15 co-pay	\$15 co-pay	\$15 co-pay	\$15 co-pay	\$15 co-pay	\$15 co-pay
Tint (solid and gradient)	\$15 co-pay	\$15 co-pay	\$15 co-pay	\$15 co-pay	\$15 co-pay	\$15 co-pay	\$15 co-pay	\$15 co-pay
Standard plastic scratch coating	\$0 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay
Standard polycarbonate - adults	\$40 co-pay	\$40 co-pay	\$40 co-pay	\$40 co-pay	\$40 co-pay	\$40 co-pay	\$40 co-pay	\$40 co-pay
Standard polycarbonate - kids under 19	\$0 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay	\$0 co-pay
Standard anti-reflective coating	\$45 co-pay	\$45 co-pay	\$45 co-pay	\$45 co-pay	\$45 co-pay	\$45 co-pay	\$45 co-pay	\$45 co-pay
Other add-ons	20% off retail	20% off retail	20% off retail	20% off retail	20% off retail	20% off retail	20% off retail	20% off retail
Contact lenses (materials only)								
Conventional	\$0 co-pay / \$200 allowance 15% off balance over \$200	\$0 co-pay / \$150 allowance 15% off balance over \$150	\$0 co-pay / \$130 allowance 15% off balance over \$130	\$0 co-pay / \$100 allowance 15% off balance over \$100	\$0 co-pay / \$200 allowance 15% off balance over \$200	\$0 co-pay / \$150 allowance, 15% off balance over \$150	\$0 co-pay / \$130 allowance, 15% off balance over \$130	\$0 co-pay / \$130 allowance, 15% off balance over \$130
Disposable	\$0 co-pay / \$200 allowance, plus balance over \$150	\$0 co-pay / \$150 allowance, plus balance over \$150	\$0 co-pay / \$130 allowance, plus balance over \$130	\$0 co-pay / \$100 allowance, plus balance over \$100	\$0 co-pay / \$200 allowance, plus balance over \$150	\$0 co-pay / \$150 allowance, plus balance over \$150	\$0 co-pay / \$130 allowance, plus balance over \$130	\$0 co-pay / \$130 allowance, plus balance over \$130
Medically necessary	\$0 co-pay, paid-in-full	\$0 co-pay, paid-in-full	\$0 co-pay, paid-in-full	\$0 co-pay, paid-in-full	\$0 co-pay, paid-in-full	\$0 co-pay, paid-in-full	\$0 co-pay, paid-in-full	\$0 co-pay, paid-in-full
Frequency								
Examination	Once every 12 months	Once every 12 months	Once every 12 months	Once every 12 months	Once every 12 months	Once every 12 months	Once every 12 months	Once every 12 months
Lenses or contact lenses	Once every 12 months	Once every 12 months	Once every 12 months	Once every 12 months	Once every 12 months	Once every 12 months	Once every 12 months	Once every 12 months
Frame	Once every 12 months	Once every 12 months	Once every 12 months	Once every 12 months	Once every 24 months	Once every 24 months	Once every 24 months	Once every 24 months

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