

## 2017 Vision Plan Comparison Chart

	<b>Vision Plan (LLNS paid)</b>	<b>Vision Plan Plus (Employee paid)</b>
Frequency (calendar beginning January)	Exams: 12 months Lenses: 12 months Frames: 24 months	Exams: 12 months Lenses: 12 months Frames: 12 months
Examination	\$20 copay	\$10 copay
Lenses	\$25 copay	Covered no copay
Lens Options:		
Anti-reflective coating	\$37-75 copay	\$37-75 copay
UV Protection	\$10-14 copay	\$10-14 copay
Frame maximum allowance	\$150	\$250
Frame allowance @ Costco	\$80	\$135
Elective contact lenses allowance	\$130	\$200
Necessary contact lenses	\$25 copay	Covered no copay