

Safety Eyewear Plan

The Safety Eyewear Plan is available to State employees who are required to use safety glasses on a full-time basis. Eligible employees must have their HR office complete and submit the Specialty Glasses Employee Certification Form on their behalf. The Safety Eyewear Plan offers savings for safety frames and lenses that meet or exceed ANSI standards.

Vision Care Services	Member In-Network Coverage	Member Out-of-Network Reimbursement
FRAMES		
Any available frame at provider location	\$65 Allowance, Member pays difference	N/A
STANDARD PLASTIC LENSES*		
Single vision	100% of EyeMed approved amount, \$0 Copay	N/A
Bifocal	100% of EyeMed approved amount, \$0 Copay	N/A
Trifocal	100% of EyeMed approved amount, \$0 Copay	N/A
Lenticular	100% of EyeMed approved amount, \$0 Copay	N/A
Standard Progressive Lens	100% of EyeMed approved amount, \$0 Copay	N/A
LENS OPTIONS		
Polycarbonate	100% of EyeMed approved amount, \$0 Copay	N/A
Tint (Solid and Gradient)	100% of EyeMed approved amount, \$0 Copay	N/A

Vision Care Services	Frequency (In-Network and Out-of Network)
Lenses	Once every 24 months; Once every 12 months if prescription changes
Frame	Once every 24 months; Once every 12 months if prescription changes

*If a member seeks Standard Plastic Lenses in AK, CA, HI, OR, WA, Group Contracted Rate is \$15 higher.

Safety: Value added savings

Vision Care Services	Member In-Network Coverage	Member Out-of-Network Reimbursement
FRAMES		
Any available frame at provider location	20% off balance over \$65	N/A
STANDARD PLASTIC LENSES		
Premium Progressive Lenses Tiers 1–3	\$20–45 Copay	N/A
Premium Progressive Lenses Tier 4	\$0 Copay, 80% of charge less \$120 Allowance	N/A
LENS OPTIONS		
UV Treatment	\$15	N/A
Tint (Photochromic)	\$75	N/A
Standard Plastic Scratch Coating	\$15	N/A
Standard Anti-Reflective Coating	\$45	N/A
Polarized	20% off Retail Price	N/A
Premium Anti-Reflective Tiers 1–2	\$57–68	N/A
Premium Anti-Reflective Tiers 3–4	80% of charge	N/A
Other Add-Ons	20% off Retail Price	N/A