

Vision Plans

This is a membership plan, not vision insurance.

Welcome to Eyecare of Michigan. Our mission is simple! Our vision plans allow for maximum benefits with significant savings while offering the individual the ability to continue their relationship with the independent eyecare professional that they have come to know and trust.

Review the plans listed below - all benefits are covered once every 12 months.

100 Plan (Co-pays: Exam - \$15.00; Frame and Lenses - \$25.00; Contacts - N/A)

Eye, Health and Vision Care Exam

- Includes refraction and dilation when indicated.

Spectacle Lenses

- Single Vision, Flat Top 25/28 Bifocal, Trifocal 7 x 25; 7 x 28
- Progressive multifocal - Member pays price difference between retail price of progressive and trifocal.
- Standard lens material - CR-39 or glass available.
- Lens upgrades - Tints, anti-reflective, scratch coats, hi-index, transitions, etc. available to member at UCR.

Frame

- \$100 benefit towards any frame.
- Member is responsible for amount exceeding \$100.

Contact Lenses

- In lieu of spectacle lenses and frames.
- Member receives \$105 contact lens benefit.
- Member is responsible for any overages.
- Benefit may be used for contact lens professional fees and/or contact lens material fees.

120 Plan (Co-pays: Exam - \$10.00; Frame and Lenses - \$25.00; Contacts - N/A)

Eye, Health and Vision Care Exam

- Includes refraction and dilation when indicated.

Spectacle Lenses

- Single Vision, Flat Top 25/28 Bifocal, Trifocal 7 x 25; 7 x 28
- Progressive multifocal - Member pays price difference between retail price of progressive and trifocal.
- Standard lens material - CR-39 or glass available.
- Lens upgrades - Tints, anti-reflective, scratch coats, hi-index, transitions, etc. available to member at UCR.

Frame

- \$120 benefit towards any frame.
- Member is responsible for amount exceeding \$120.

Contact Lenses

- In lieu of spectacle lenses and frames.
- Member receives \$140 contact lens benefit.
- Member is responsible for any overages.
- Benefit may be used for contact lens professional fees and/or contact lens material fees.

160 Plan (Co-pays: Exam - \$5.00; Frame and Lenses - \$0; Contacts - N/A)

Eye, Health and Vision Care Exam

- Includes refraction and dilation when indicated.

Spectacle Lenses

- Single Vision, Flat Top 25/28 Bifocal, Trifocal 7 x 25; 7 x 28
- Progressive multifocal - Member pays price difference between \$200 allowance and retail price of progressive.
- Polycarbonate - Benefit includes scratch guard and UV protection.
- Standard lens material - CR-39 or glass available.
- Lens upgrades - Tints, anti-reflective, scratch coats, hi-index, transitions, etc. available to member at UCR.

Frame

- \$160 benefit towards any frame.
- Member is responsible for amount exceeding \$160.

Contact Lenses

- In lieu of spectacle lenses and frames.
- Member receives \$180 contact lens benefit.
- Member is responsible for any overages.
- Benefit may be used for contact lens professional fees and/or contact lens material fees.

For questions, inquiries, contact:

Eyecare of Michigan

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Benefits available through participating private practice doctors. For a provider listing in your area, please visit www.vcdplans.com