

**LOUISIANA SHERIFFS' ASSOCIATION  
SCHEDULE OF VISION BENEFITS**

<b>PLAN NAME</b>	<b>PLAN NUMBER</b>
Louisiana Sheriffs' Association	722XXFF4
<b>PLAN'S ORIGINAL BENEFIT PLAN DATE</b>	<b>PLAN'S ANNIVERSARY DATE</b>
July 1, 2015	July 1st

**NETWORK COVERED BENEFITS**

<b>Benefit and Frequency</b>	<b>Plan Participant Responsibility</b>
Routine Eye Health Examination Inclusive of Dilation (Once every 12 months)	\$0.00 Copay
Spectacle Lenses (One per eye every 12 months)	\$15.00 Copay
Single Vision	Included
Choice of plastic or glass lenses	Included
Scratch-Resistant Coating	Included
Lined Bifocal Lenses	Included
Lined Trifocal Lenses	Included
Oversized Lenses	Included
Lenticular Lenses	Included
Polycarbonate Lenses	
<ul style="list-style-type: none"> <li>Children under 19 years old</li> </ul>	Included
<ul style="list-style-type: none"> <li>Monocular Plan Participants</li> </ul>	Included
<ul style="list-style-type: none"> <li>Plan Participants with Prescriptions not more than +/-6.00 diopters</li> </ul>	Included
<ul style="list-style-type: none"> <li>Adults not mentioned above</li> </ul>	\$30.00 Network pricing
Fashion and Gradient Tinting of Plastic Lenses	Included
Ultraviolet Coating	\$12.00 Network pricing
Anti-Reflective (AR) Coating	
<ul style="list-style-type: none"> <li>Standard</li> </ul>	\$35.00 Network pricing
<ul style="list-style-type: none"> <li>Premium</li> </ul>	\$48.00 Network pricing
<ul style="list-style-type: none"> <li>Ultra</li> </ul>	\$60.00 Network pricing
Progressive Lenses	
<ul style="list-style-type: none"> <li>Standard</li> </ul>	\$50.00 Network pricing
<ul style="list-style-type: none"> <li>Premium</li> </ul>	\$90.00 Network pricing
<ul style="list-style-type: none"> <li>Ultra</li> </ul>	\$140.00 Network pricing
Intermediate-Vision Lenses	\$30.00 Network pricing
Blended-Segment Lenses	\$20.00 Network pricing
High-Index Lenses	\$55.00 Network pricing
Polarized Lenses	Included
Photochromic Glass Lenses	Included
Plastic Photosensitive Lenses	Included
Scratch Protection Plan	
<ul style="list-style-type: none"> <li>Single Vision</li> </ul>	\$20.00 Network pricing
<ul style="list-style-type: none"> <li>Multifocal Lenses</li> </ul>	\$40.00 Network pricing

<b>Eyeglass Frames (One every 24 months)</b>	
Non-Collection Frames	Up to \$150.00 Allowance Plus a 20% discount* on any overage
Davis Vision Collection Frames (only available at certain Network Providers)	
• Fashion Level	Included
• Designer Level	Included
• Premier Level	\$25.00 Network pricing
<b>Contact Lenses in lieu of Eyeglasses (One per eye every 12 months)</b>	
Standard Contact Lenses	
• Materials only	Up to \$130.00 Allowance Plus a 15% discount* on any overage
• Evaluation, Fitting and Follow-up Care	Included
Specialty Contact Lenses	
• Materials only	Up to \$130.00 Allowance Plus a 15% discount* on any overage
• Evaluation, Fitting and Follow-up Care	Up to \$60.00 Allowance Plus a 15% discount* on any overage
Medically Necessary Contact Lenses	
• Prior Authorization Required	Included
• Includes Materials, Evaluation, Fitting and Follow-up Care	Included

**NO BENEFITS ARE AVAILABLE FOR NON-NETWORK PROVIDERS.**

**SPECIAL NOTES**

Providers may be required in some areas to collect sales taxes over the value of covered and discounted items and services. The Plan Participant must pay any sales taxes.

\*Discounts are not available at Costco, Walmart or Sam's Club locations.

Laser Vision Correction is not a covered Benefit.

One year Eyeglass breakage warranty included.

**ELIGIBILITY WAITING PERIOD**

The Plan Administrator will determine the Eligibility Waiting Period and Effective Date of coverage for all eligible Employees and their Dependents.