

## WHAT IS IT?

Vision coverage provides a benefit for professional services and corrective lenses associated with improving vision. Benefits may take the form of a reimbursement, discounts from network providers, or a combination of the two. Expenses associated with treatments of eye injury or diseases are often covered under a medical insurance plan.

There are two basic types of vision plans: comprehensive and discount plans.

- Comprehensive plans provide coverage for exams, frames and lenses (including elective contact lenses). Stand-alone plans usually have network providers who provide coverage after a copayment is satisfied (\$0, \$10, \$20 or \$25). Non-network providers are paid on a reimbursement schedule. Comprehensive plans may also provide reduced fees for services such as LASIK surgery.
- Discount plans offer reduced fees for frames and lenses (including elective contact lenses) only. Discount plans may be purchased separately or may be offered free as a value-added benefit through existing insurance carriers.

## WHY OFFER IT?

- Aids in recruiting and retention by enhancing the current benefit package.
- Workplace computer usage increases likelihood of need for corrective lenses. Research by the National Institute of Occupational Safety and Health indicates that nearly 90% of people who work in front of a computer (>3hrs/day) suffer from some type of eye trouble.
- Provides some level of vision benefits at a low cost.
- Eye examinations provide a channel for early detection of health conditions such as diabetes, high blood pressure, high cholesterol, tumors, and multiple sclerosis.

## WHAT TYPES OF EMPLOYERS OFFER IT?

All types of employers.

## WHAT SIZE EMPLOYERS OFFER IT?

All size employers that wish to enhance their overall benefits package.

## WHAT ARE THE CRITICAL UNDERWRITING OR PARTICIPATION REQUIREMENTS?

1. Employer location, and industry
2. To protect against adverse selection, insurers will often require that the coverage be bundled with a core benefit or be 100% employer funded if offered on a stand-alone basis.
3. If plan is voluntary, insurers typically have participation/employer size requirements and rates will vary based on the level of employer contributions.

## HOW MUCH DOES IT COST?

Pricing for comprehensive plans varies based on the plan design and whether the plan is voluntary or employer-paid. Average costs are based on plans with a \$25 copayment and allow exams and lenses every 12 months and frames every 24 months. (Source: Vision Service Plan)

- Employee Only: \$7
- Family: \$25

Discount plans may be provided free as a value added benefit by some insurance carriers. When purchased separately, costs range from \$1.50 to \$3.00 per employee per month.

## INFORMATIONAL LINK(S)

- [Facts About Diabetic Eye Disease](#) (National Eye Institute)
- [Glaucoma Takes Sight Without Warning](#) (American Optometric Association)
- [The Eye Exam Defined](#) (mayoclinic.com)

## VISION PROVIDERS:

- [Vision Service Plan](#)
- [Medical Eye Services](#)
- [EyeMed](#)

## PROS AND CONS

### PROS

- Low cost
- Aids in recruiting and retention
- Requires minimal implementation and administration

### CONS

- Although minimal, additional administrative burden
- Additional cost may be prohibitive for some employees



*This Fact Sheet is designed to provide a general overview of the benefit program, service, or regulatory act it describes. The information included in this document is not a substitute for legal or professional opinion relative to a plan sponsor's particular fact pattern. Your ArlenGroup consultant can answer more specific questions relative to its application for your organization.*