

University of Pittsburgh your fashion excellence vision plan

Client code: 4228

Frequency

Exam: 12 mos.

Lenses & lens upgrades: 12 mos.

Frame: 12 mos.

Contacts, evaluation & fitting: 12 mos.



Sign up during open enrollment

For more details about the plan, visit davisvision.com/member and enter your Client Code or call 1 (877) 923-2847 and enter your Client Code when prompted.



Exams & Services

Eye Exam copay:

\$0

Contacts evaluation, fitting & follow-up:

Conventional lens

Specialty lens

Covered in full

Covered in full



(W) (W) Lenses

Lens copay:

\$25

Using your client code

Log in using your client code (listed above) at davisvision.com/member to find a list of in-network providers near you and access your benefit information.



Frame

Allowance:

Other locations

Visionworks1

\$60

\$110

The Exclusive Collection copay:

Fashion Covered in full Designer \$20

Premier \$40

(D)(8)

Contacts³ in lieu of glasses

Allowance:

\$75

The Exclusive Collection

The Exclusive Collection of frames is available at nearly 9,000 locations across the U.S. Log in to browse frames, and find a Collection near you.

Free breakage warranty

Your glasses are covered with our FREE one-year breakage warranty. Some limitations apply.

Find a network provider...

Enter your client code in the "Member Sign In" section of our website at davisvision.com/member to locate a provider near you including Visionworks.

Ç⊚⊚∵ Options & upgrades

Lens options

Clear plastic single-vision, bifocal, trifocal or

lenticular lenses (any RX).....\$0

Polycarbonate Lenses (Children / Adults).....\$0 or \$35

High-Index Lenses 1.67......\$60

High-Index Lenses 1.74.....\$120

Polarized Lenses......\$75

Progressive Lenses (Standard / Premium / Ultra/ Ultimate)......\$65 / \$105 / \$140 / \$175

Anti-Reflective (AR) Coating (Standard / Premium / Ultra/ Ultimate)...... \$40 / \$55 / \$69 / \$85

Ultraviolet Coating.....\$15

Tinting of Plastic Lenses (Solid / Gradient)......\$15
Plastic Photochromic Lenses (Transitions® Signature™).....\$70

Premium Scratch-Resistant Coating.....\$30

Scratch-Protection Plan (Single-Vision | Multifocal).....\$20 | \$40

Digital Single Vision Lenses.....\$30

Trivex Lenses.....\$50

Blue Light Filtering.....\$15

Additional savings

Retinal imaging (Member charge).....\$39

Additional pairs of eyeglasses......30% discount²





Out-of-network benefits

You may receive services from an out-of-network provider, although you will receive the greatest value and maximize your benefit dollars if you select a provider who participates in the network.

Out-of-network reimbursement schedule (up to)

Eye Examination: \$32 Frame: \$30

Single-Vision Lenses: \$25

Bifocal / Progressive Lenses: \$36

Trifocal Lenses: \$46 Lenticular Lenses: \$72 Daily Wear Evaluation/Fitting: \$20 Extended Wear Evaluation/Fitting: \$30

Disposable Contact Lenses: \$75 Elective Contacts: \$48

Visually Required Contacts: \$225