

Renewal Date: 9/1/2023

	Silver Materials 160	Silver Complete 160	
Benefit Frequency			
Eye Exam	N/A	12 Months	
Frames	24 Months	24 Months	
Lenses	12 Months	12 Months	
In Network Allowance			
Frames	\$160	\$160	
Single Vision Lenses	Included	Included	
Bifocal Lenses	Included	Included	
Trifocal Lenses	Included	Included	
Progressive Lenses	Included*	Included*	
Anti-reflective Coating	Included*	Included*	
Polycarbonate for Kids	Included	Included	
Elective Contact Lenses	\$160	\$160	
Member Fees			
Eye Exam	N/A	\$15	
Glasses	\$15	\$15	
Polycarbonate for Kids	\$25	\$25	
Rates			
Primary Only	\$9.34	\$13.48	
Primary + 1	\$14.94	\$21.57	
Primary + Children	\$17.24	\$24.88	
Whole Family	\$29.30	\$42.31	

### **ADDITIONAL SAVINGS**

Flexible Exam Benefit	In the event that a member has an eye exam included with another plan, Vision Care Direct allows you to use your exam benefit for other services or materials. A \$65 credit will be applied to your bill at time of service toward non-covered items.
Lasik Vision Correction	Get \$200 toward your Lasik procedure through your VCD materials benefit. Lasik is in lieu of glasses and contacts. To file for your Lasik reimbursement, go to members.visioncaredirect.com/lasik.

\* Standard digital progressive lenses and anti-reflective coatings are included at no additional charge through any of our VCD PLUS providers. The progressive lens allowance through a Standard VCD provider is equal to the doctor's retail cost of standard trifocal lenses. There is no benefit for anti-reflective coatings through Standard VCD providers.

## Thank you for your business!

Vision Care Direct is a membership plan, not insurance. Minimum participation requirement for the plans offered above is 2 employees. Contact lens allowance amount is in lieu of glasses. For a complete listing of allowances, exclusions and limitations, please reference the enclosed Allowance Summary. © 2023 Vision Care Direct. All rights reserved.



**KADEN JAMES** 

Senior Account Executive



# PAYROLL DEDUCT CHEAT SHEET

Vision Care Direct bills on a monthly basis, but we understand there are varying structures for how employers pay their employees. Knowing how much to deduct from an employee's paycheck so your account balances correctly can be a tricky ordeal. We've included a helpful guide below to help you manage your payroll effectively and efficiently. *Please note: Your bill from VCD will always reflect monthly rates regardless of your payroll structure.* 

	Silver Materials 160	Silver Complete 160	
Weekly Payroll Rate			
Primary Only	\$2.16	\$3.11	
Primary + 1	\$3.45	\$4.98	
Primary + Children	\$3.98	\$5.74	
Whole Family	\$6.76	\$9.76	
Bi-weekly Payroll Rate			
Primary Only	\$4.31	\$6.22	
Primary + 1	\$6.90	\$9.96	
Primary + Children	\$7.96	\$11.48	
Whole Family	\$13.52	\$19.53	
Semi-monthly Payroll Rate			
Primary Only	\$4.67	\$6.74	
Primary + 1	\$7.47	\$10.79	
Primary + Children	\$8.62	\$12.44	
Whole Family	\$14.65	\$21.16	

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KADEN JAMES Senior Account Executive



# Silver Materials 160

## Allowance Summary

Cowley County Community College

OF KANSAS			_
	VCD Standard Network	VCD PLUS Network	Out of Network
Benefit Frequency			
Eye Exam	N/A	N/A	N/A
Frames	24 Months	24 Months	24 Months
Lenses	12 Months	12 Months	12 Months
Contacts	12 Months	12 Months	12 Months
Member Fees			
Eye Exam	N/A	N/A	N/A
Glasses	\$15	\$15	\$0
Polycarbonate for Kids	\$25	\$25	\$0
Contacts	\$0	\$0	\$0
Lasik	\$0	\$0	\$0
Eye Exam (amount included after exam fee listed above)			
Comprehensive eye health examination including refraction and dilation Flexible Exam Benefit	N/A	N/A	N/A
In the event you have an eye exam included with another plan, Vision Care			
Direct allows you to use your exam benefit for other services or materials. A	N/A	N/A	N/A
credit will be applied to your bill at time of service toward non-covered items.			
Frames			
Frame allowance toward retail price of any frame in provider's office.	\$160	\$160	\$60
Lenses (amount included after glasses fee listed above)			
Single Vision: CR-39 in glass or plastic	100%	100%	\$50
Bifocal: CR-39 in glass or plastic	100%	100%	\$75
Trifocal: CR-39 in glass or plastic	100%	100%	\$100
Standard Progressive Lenses	Up to retail price of lined trifocal	Up to retail price of lined trifocal	\$100
Premium Progressive Lenses	Up to retail price of lined trifocal	Up to retail price of standard progressive	\$100
Lens Options			
Scratch Resistant Coating	Not Included	100%	\$0
Ultraviolet Coating	Not Included	100%	\$0
Anti-Reflective Coating	Not Included	100%	\$0
Oil & Water Resistant Coating	Not Included	100%	\$0
Polycarbonate for Kids (after PK fee listed above)	100%	100%	\$0
Polycarbonate for Adults	Not Included	Not Included	\$0
Contacts			
Elective Contact Lenses: In lieu of glasses. Can be used toward multi-focal contacts and contact lens fitting fees.	\$160	\$160	\$80
Medically Necessary Contact Lenses: Requires prior authorization from your doctor to the Vision Care Direct Medical Director. Medically necessary is defined as 1) Keratoconus; or 2) monocular and/or binocular aphakia	\$750	\$750	\$80

#### Lasik

In lieu of glasses and contacts. Allowance of \$200 toward Lasik procedure in the form of a reimbursement directly to the member. To file for Lasik reimbursement, go to members.visioncaredirect.com/lasik

#### GENERAL LIMITATIONS AND EXCLUSIONS:

Vision Care Direct guarantees benefits only for the products/services listed above. Any charges incurred for items not detailed here, or that are incurred after the membership ends, are the sole responsibility of the member. Out of network benefits are provided in the form of a reimbursement directly to the member. To file for an out of network reimbursement, visit members.visioncaredirect.com/oon.

Get more for your money! To access enhanced benefits through the VCD PLUS Network, look for locations on the VCD Provider Directory at www.visioncaredirect.com with this logo:





# Silver Complete 160

## Allowance Summary

Cowley County Community College

OF KANSAS			
	VCD Standard Network	VCD PLUS Network	Out of Network
Benefit Frequency			
Eye Exam	12 Months	12 Months	12 Months
Frames	24 Months	24 Months	24 Months
Lenses	12 Months	12 Months	12 Months
Contacts	12 Months	12 Months	12 Months
Member Fees			
Eye Exam	\$15	\$15	\$0
Glasses	\$15	\$15	\$0
Polycarbonate for Kids	\$25	\$25	\$0
Contacts	\$0	\$0	\$0
Lasik	\$0	\$0	\$0
Eye Exam (amount included after exam fee listed above)			
Comprehensive eye health examination including refraction and dilation	100%	100%	\$50
Flexible Exam Benefit			
In the event you have an eye exam included with another plan, Vision Care			
Direct allows you to use your exam benefit for other services or materials. A	\$65	\$65	\$0
credit will be applied to your bill at time of service toward non-covered items.			
Frames			
Frame allowance toward retail price of any frame in provider's office.	\$160	\$160	\$60
Lenses (amount included after glasses fee listed above)			
Single Vision: CR-39 in glass or plastic	100%	100%	\$50
Bifocal: CR-39 in glass or plastic	100%	100%	\$75
Trifocal: CR-39 in glass or plastic	100%	100%	\$100
Standard Progressive Lenses	Up to retail price of lined trifocal	Up to retail price of lined trifocal	\$100
Premium Progressive Lenses	Up to retail price of lined trifocal	Up to retail price of standard progressive	\$100
Lens Options			
Scratch Resistant Coating	Not Included	100%	\$0
Ultraviolet Coating	Not Included	100%	\$0
Anti-Reflective Coating	Not Included	100%	\$0
Oil & Water Resistant Coating	Not Included	100%	\$0
Polycarbonate for Kids (after PK fee listed above)	100%	100%	\$0
Polycarbonate for Adults	Not Included	Not Included	\$0
Contacts			
Elective Contact Lenses: In lieu of glasses. Can be used toward multi-focal			
contacts and contact lens fitting fees.	\$160	\$160	\$80
Medically Necessary Contact Lenses: Requires prior authorization from your			
doctor to the Vision Care Direct Medical Director. Medically necessary is	\$750	\$750	\$80
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# SIMPLE. FLEXIBLE. AFFORDABLE.

	BENEFITS	INCLUDED
FRAMES	Up to \$160	$\bigcirc$
CONTACTS	Up to \$160	$\bigcirc$
	Single Vision	$\bigcirc$
LENSES	Bifocal	$\bigcirc$
	Trifocal	$\bigcirc$
	HD Progressive	$\bigcirc$
	Anti-Reflective Coating	$\bigcirc$
VCD PLUS EXTRAS*	Scratch Resistance	$\bigcirc$
	UV Protection	$\bigcirc$
	Oil & Water Resistance	$\bigcirc$

\*Benefits available exclusively at VCD PLUS participating providers. Contact lens benefit is in lieu of glasses.

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## COMPLETE PAIR OF GLASSES STARTING AT JUST \$15

At last, you finally have the freedom to use your materials allowance the way you want without all the surprise out of pocket expenses. With VCD PLUS providers in your area, you'll have access to high definition (single vision, bifocal, trifocal or premium progressive) lenses, premium anti-reflection coating, scratch resistant coating and UV protection all for one low price!

# OWNED BY KANSANS, FOR KANSANS

Vision Care Direct is proudly owned by private practice optometrists right here in the great state of Kansas. Revenue and tax dollars stay in Kansas to support your local communities and schools.

