

**Crouse Hospital
Non - Union
Vision Plan Overview**

In – Network Benefits	Davis Vision
Dependent Coverage	To Age 19
Student Coverage	To Age 25
Benefit period	12 Months
Eye Exam	No Cost
Glasses/Contact Lenses	\$20 Co-pay from provider selection
Out-of-Network Benefits	Provides up to a \$30 allowance for eye exam, up to a \$30 allowance for frames, up to a \$75 allowance for contact lenses.

*There are specific dollar allowances for Non Plan frames or contact lenses. See plan summaries for more detail. Summaries are available in Human Resources.

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