



## Summary of Vision Benefits 2017-18 Plan Year

		 <b>moda</b> HEALTH	 <b>moda</b> HEALTH			
Vision		<b>Opal Plan</b> May use any licensed provider	<b>Pearl Plan</b> May use any licensed provider			
Plan Year Maximum		\$600*	\$400*			
<b>Routine Eye Exam:</b>						
Benefit:		Plan pays 100% (up to plan maximum)	Plan pays 100% (up to plan maximum)			
Frequency:		Once per Plan Year	Once per Plan Year			
<b>Lenses:</b>						
Basic lens benefit:		Plan pays 100% (up to plan maximum)	Plan pays 100% (up to plan maximum)			
Lens enhancements						
Frequency:		Once per Plan Year	Once per Plan Year			
<b>Frames / Contacts:</b>						
Benefit:		Plan pays 100% (up to plan maximum)	Plan pays 100% (up to plan maximum)			
Frequency:		<b>Frames:</b> Age 0-16: Once per Plan Year Age 17+: Once every two Plan Years <b>Contacts:</b> Once per Plan Year	<b>Frames:</b> Age 0-16: Once per Plan Year Age 17+: Once every two Plan Years <b>Contacts:</b> Once per Plan Year			

\*Exam and hardware charges all apply to the plan year maximum on Moda Plans  
 \*\*Must be enrolled in a Kaiser Medical Plan to enroll in the Kaiser Vision Plan

**This document is for comparison purposes only and is not intended to fully describe the benefits of each Plan. Refer to your member handbook for more details of benefit coverage. In the case of a conflict between this comparison and your member handbook, the member handbook will prevail.**