

New Mexico Public Schools Insurance Authority your vision plan

Client code: 2561

Frequency

Exam: 12 mos.

Lenses & lens upgrades: 12 mos.

Frame: 24 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

Frame

Eye Exam copay: **\$10**

Contacts evaluation, fitting & follow-up:

Allowance:

+Additional 20% **off** any overage.²

The Exclusive Collection copay:

Designer

Covered in full

Conventional lens

Specialty lens

15% discount²

Other locations

\$100

Covered in full

15% discount²

Visionworks1

\$150



Contacts³ in lieu of glasses

Allowance:

Lens copay:

\$15

\$110

+Additional 15% off any overage.2

_ . .

The Exclusive Collection of Contact Lenses:4

Covered in full

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.

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.

Covered in full

∴ Copays for options & upgrades

Lens options

Clear plastic single-vision, bifocal, trifocal or

lenticular lenses (any RX)	\$0
Polycarbonate Lenses (Children / Adults).	\$0 or \$30
High-Index Lenses 1.67.	·\$55
High-Index Lenses 1.74.	-\$120
Polarized Lenses.	-\$75
Progressive Lenses (Standard / Select/ Premium / Ultra/ Ultimate)	-\$50 / \$ 70 / \$90 / \$140 / \$175
Anti-Reflective (AR) Coating (Standard / Premium / Ultra/ Ultimate)	-\$35 / \$48 / \$60 / \$85
Ultraviolet Coating.	·\$12
Tinting of Plastic Lenses (Solid / Gradient)	-\$0
Plastic Photochromic Lenses (Transitions [®] Signature™)	-\$65
Scratch-Resistant Coating.	·\$0
Premium Scratch-Resistant Coating.	·\$30
Scratch-Protection Plan (Single-Vision Multifocal)	- \$20 \$40
Digital Single Vision Lenses.	·\$30
Trivex Lenses.	· \$50

DOWNLOAD OUR MOBILE APP Available for iOS & Android devices. - Check eligibility - Review benefits - Access member ID - Provider search with directions

Additional savings

Retinal imaging (Member charge)......\$39
Additional pairs of eyeglasses......30% discount²

Blue Light Filtering.....\$15



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: \$35	Trifocal Lenses: \$55
Frame: \$35	Lenticular Lenses: \$80
Single-Vision Lenses: \$25	Elective Contact Lenses: \$110
Bifocal / Progressive Lenses: \$40	Visually Required Contacts: \$210

^{1.} Excludes Maui Jim® eyewear. 2. Some limitations apply to additional discounts; discounts not applicable at all in-network providers. 3. Contact lens coverage varies by product selection. Visually Required contacts are covered in full with prior approval. 4. The Davis Vision Exclusive Collection of Contact Lenses is available at participating providers. Evaluation, fitting and follow-up care for Collection contacts are covered in full. Davis Vision has done its best to accurately reflect plan coverage herein. If differences exist between this document and the plan contract, the contract will prevail.