



Schedule of Vision Benefits

Benefit and Frequency	Participating Provider	Non-Participating Provider
Examination	Benefit Coverage	Reimbursed Amount
Once Every Calendar Year	<ul style="list-style-type: none"> 100% after \$10 copay 	<ul style="list-style-type: none"> Up to \$45
Lenses	Benefit Coverage	Reimbursed Amount
Once Every Calendar Year	Standard Glass or Plastic	
<ul style="list-style-type: none"> Single Vision Bifocal Trifocal Lenticular Standard Scratch Coating Progressives – Tier 1 Progressives – Tier 2 Polycarbonates 	<ul style="list-style-type: none"> 100% after \$25 copay 100% after \$25 copay 100% after \$25 copay 100% after \$25 copay 100% 100% 100% 100% 	<ul style="list-style-type: none"> Up to \$40 Up to \$60 Up to \$80 Up to \$80 Up to \$5 Up to \$35 Up to \$40 Up to \$10
Frame	Benefit Coverage	Reimbursed Amount
Once Every Calendar Year	<ul style="list-style-type: none"> Up to \$150 (20% discount off balance)* 	<ul style="list-style-type: none"> Up to \$50
Contact Lenses	Benefit Coverage	Reimbursed Amount
Once Every Calendar Year	In lieu of eyeglass lenses/frame	
<ul style="list-style-type: none"> Elective Contact Lenses 	<ul style="list-style-type: none"> Up to \$140 retail (Discount off balance: 15% discount on Conventional or 10% discount on Disposable)** 	<ul style="list-style-type: none"> Up to \$140
<ul style="list-style-type: none"> Fit/Follow-up*** 	Once every calendar year	
<ul style="list-style-type: none"> Standard Daily Wear 	<ul style="list-style-type: none"> 100% after \$20 copay 	<ul style="list-style-type: none"> Up to \$20
<ul style="list-style-type: none"> Standard Extended Wear 	<ul style="list-style-type: none"> 100% after \$30 copay 	<ul style="list-style-type: none"> Up to \$30
<ul style="list-style-type: none"> Specialty Wear 	<ul style="list-style-type: none"> 100% after \$50 copay 	<ul style="list-style-type: none"> Up to \$30
<ul style="list-style-type: none"> Medically Necessary**** 	<ul style="list-style-type: none"> 100% 	<ul style="list-style-type: none"> Up to \$210

* Does not apply to Costco, Wal-Mart / Sam's Club, or LensCrafters locations or for certain proprietary brands or at online retailers.

** Does not apply to Costco, Wal-Mart/Sam's Club, LensCrafters, Contact Fill (NVA Mail Order), or certain locations at: Target & Pearle and may be prohibited by some manufacturers.

*** Only covered if member chooses contact lenses.

**** Subject to criteria as defined in the insurance policy.

Lens options & services purchased from a participating NVA provider will be provided to the member at the amounts listed in the fixed option pricing list below:

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|--|---|---|--|
| <ul style="list-style-type: none"> \$75 Polarized \$30 Blended Bifocal (Segment) \$40 Blue Light Blocker (Standard) \$60 Blue Light Blocker (Premium) \$150 Blue Light Blocker (Ultra) \$12 Fashion Gradient | <ul style="list-style-type: none"> \$20 Glass Photogrey (Single Vision) \$30 Glass Photogrey (Multi-Focal) \$55 High Index \$12 Ultraviolet Coating \$65 Transitions Single Vision (Standard) \$70 Transitions Multi-Focal (Standard) | <ul style="list-style-type: none"> \$10 Solid Tint \$40 AR Coatings – Tier 1 \$50 AR Coatings – Tier 2 \$65 AR Coatings – Tier 3 \$80 AR Coatings – Tier 4 20% disc. - AR Coatings – Tier 5 | <ul style="list-style-type: none"> \$100 Progressives – Tier 3 \$120 Progressives – Tier 4 \$140 Progressives – Tier 5 \$165 Progressives – Tier 6 \$190 Progressives – Tier 7 20% disc. – Progressives – Tier 8 |
|--|---|---|--|

NOTE: Fixed prices/courtesy discount do not apply at Walmart/Sam's Club, LensCrafters, or Costco locations. Fixed prices listed above may differ at online retailers. Please be sure to confirm the level of service prior to placing an order.

For lens options & services purchased from a participating NVA provider, NVA members will only pay the fixed maximum amount or the provider's Usual and Customary (U&C) charge less 20%, whichever is less. Options not listed will be priced by NVA providers at 20% off the Provider's Retail (U&C) price. Fixed prices are available in-network only. Discounts are not insured benefits. In certain states, members may be required to pay the full retail amount and not the negotiated discount amount at certain participating providers. Some optometrists affiliated with Optical Retail locations (i.e., Costco, LensCrafters, Walmart, Visionworks, etc.) are independent providers and may not participate in the NVA program.

Participating providers are not contractually obligated to offer sale prices in addition to outlined coverage. Regardless of medical or optical necessity, vision benefits are not available more frequently than specified in your policy.

Access your vision benefits on the go with the NVA Member Mobile App!



Note: Only NVA active main cardholders can access the NVA vision benefits member app. Dependents cannot create their own accounts on the app.

Your NVA Vision Benefit Summary

Plan Specific Details Online: The NVA website is easy to use and provides the most up-to-date information for program participants:

- Locate a nearby participating provider by name, zip code, or City/State, Verify eligibility for you or a dependent
- View benefit program and specific detail, Review claims, Print ID cards (when applicable), Nominate a non-participating provider to join the NVA network

Examinations: The comprehensive exam includes case history, examination for pathology or anomalies, visual acuity (clearness of vision), refraction, tonometry (glaucoma test), and dilation (if professionally indicated).

Lenses: NVA provides coverage in full for standard glass or plastic eyeglass lenses.

Frames: Select any frame from the participating provider's inventory. Any amount in excess of your plan allowance is the member's responsibility. Frame choices vary from office to office. (Visit NVA's website to view the NVA Vision Benefit Maximizer® Program)

Contact Lenses: The contact lens benefit includes all types of contact lenses such as hard, soft, gas permeable, and disposable lenses. Medically necessary contact lenses include fitting and follow up and may be covered if certain criteria are met.

Non-Participating Providers: You will be responsible for one hundred percent (100%) of the cost at the time of service at a non-participating provider. You can request a claim form from NVA via the website www.e-nva.com or you may submit receipts along with a letter containing the member's full name, patient's full name, address, ID#, and sponsoring organization to NVA, P.O. Box 2187, Clifton, NJ 07015.

Laser Eye Surgery: NVA has chosen **The National LASIK Network** to serve their members. This network was developed by **LCA Vision** in 1999 and is one of the largest panels of LASIK surgeons in the U.S. Members are entitled to significant discounts and a free initial consultation with all in-network providers.

Hearing Discount: You will receive up to 60% savings at participating provider locations through NationsHearing®.

Additional Discounts: In addition to your funded vision benefit you are eligible to access the **EyeEssential® Plan Discount** (In Network Only) on additional purchases during the plan period. Please see table for more detail regarding NVA's discount plan.

Benefits and discounts may be different at online retailers. Please be sure to confirm the level of service prior to placing an order.

**Contact lens discount is not applicable to mail order; however, you may get even better pricing on contact lenses through Contact Fill (www.contactfill.com).*

Your NVA EyeEssential® Plan Discount – In Network Only		
Service/Materials	Participating Provider	Lens Options
Eye Examination:	Member Cost: Retail Less \$10	\$12 Solid Tint/ Gradient Tint \$50 Standard Progressive Lenses \$75 Polarized Lenses \$65 Transitions Single Vision Standard \$70 Transitions Multi-Focal Standard \$15 Standard Scratch Coating \$12 UV Coating \$35 Polycarbonate \$45 Standard Anti-Reflective
Contact Lens Fitting:	Retail Less 10%	
Lenses: Single Vision Bifocal Trifocal or Lenticular	Glass or Plastic \$35.00 \$55.00 \$70.00	
Frame:	Retail Less 35%	
Contact Lenses*: Conventional Disposable	Member Cost: Retail Less 15% Retail Less 10%	

At NVA, We Work Only for Our Clients.

Exclusions / Limitations: No payment is made for medical or surgical treatments / Rx drugs or OTC medications / non-prescription lenses / two pair of glasses in lieu of bifocals / subnormal visual aids / vision examination or materials required for employment / replacement of lost, stolen, broken or damaged lenses/ contact lenses or frames except at normal intervals when service would otherwise be available / services or materials provided by federal, state, local government or Worker's Compensation / examination, procedures training or materials not listed as a covered service / industrial safety lenses and safety frames with or without side shields / parts or repair of frame / sunglasses.

The proposed vision insurance program is insured through Fidelity Security Life Insurance Company (FSL) Kansas City, MO. Fidelity Security Life Insurance Company brings over 45 years of underwriting experience in the insurance industry since 1969.

Fidelity Security Life Insurance Company has been rated A (Excellent), based on an analysis of financial position and operating performance, by A.M. Best Company, an independent analyst of the insurance industry. For the latest rating, access www.ambest.com.

Some provisions, benefits, exclusions, or limitations listed herein may vary depending on your state of residence.

This document is intended as a program overview only and is not a certified document of the individual plan parameters.

TIP: Users may improve visual accessibility by enabling High-Contrast Colors in Adobe Acrobat (Preferences > Accessibility).

National Vision Administrators, L.L.C.

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