

Optical Benefits

Plan participants and their eligible dependents are entitled to a pair of glasses (**lenses and frames and an optometric examination**) *once every two years*. The benefit can be rendered through *one of two vendors* contracted by the Fund, General Vision Services or Davis Vision *or through other licensed providers*.

Service through the Fund's vendors has no out-of-pocket costs for a limited selection of frames and lenses. Service rendered through other providers is subject to a maximum reimbursement of \$100, claims should be submitted within 90 days of service. Eye examinations other than for purchase of glasses or contact lenses are not covered.

General Vision Services

Examination is provided by a licensed optometrist for determination of refractive index as well as detection of cataracts, glaucoma and retinal / corneal disorders.

Frames are available in the New York Metropolitan area stores in any style, up to a retail value of \$150. Outside of the area, stores have contracted to offer up to a \$100 retail value.

Lenses are all first quality and cover single vision, conventional bifocal, blended bifocal, progressive, trifocal, cataract, safety and oversize lenses. Cosmetic tint, Sunglass tint, UV coating and Scratch-resistant coating are available at no charge (New York metropolitan area outlets only).

Contact Lenses are available instead of glasses, for either standard soft daily wear or extended wear spherical, *or a 3-month supply of basic disposable lenses*; (2 boxes for a total of 12 lenses).

Special Dependent Coverage allows eligible children under 19 (23 if a full-time student) a pair of glasses (frame and lenses) every 12 months (known as the "off year" benefit).

Participating Providers : For a listing of General Vision Providers participants may go on-line to www.generalvision.com or call GVS at 1-800-847-4661.

To Use Your Benefit at General Vision, simply go to a location and say you are a PSC-CUNY Welfare Fund participant! You do not need to call the Welfare Fund to arrange anything. General Vision will verify your eligibility.

Davis Vision

Examination is provided by a licensed optometrist for determination of refractive index as well as detection of cataracts, glaucoma and retinal / corneal disorders. There is no co-payment when using an in- network provider.

Frames are available, with no co-payment, from the Davis Vision Designer Collection, up to a retail value of \$175. This collection is available at most in-network providers. A \$25 wholesale credit is applied toward frames outside of the Collection.

Lenses are all first quality and cover plastic or glass single vision, conventional bifocal or trifocal in any prescription range, blended bifocal or trifocal lenses, post-cataract lenses, oversize lenses, fashion, sun or gradient-tinted lenses, UV coating and scratch-resistant coating , photosensitive glass lenses and polycarbonate lenses (for children, monocular patients and those with a prescription of +/- 3.0 diopters or greater) are available at with no co-payment at any in-network provider.

Contact Lenses may be selected in lieu of glasses. An \$85 fee will be applied toward contact lenses from the provider's own supply. The fee may be applied toward fitting fees and follow-up care. Medically necessary contact lenses will be covered in full with prior approval only.

Participating Providers : For a listing of Davis Vision providers by area, Davis Vision may be contacted directly at (800) 999-5431. **Participants may access the Davis Vision website at www.davisvision.com; click on "Find a Doctor" and use the access code 2022.**

To Use Your Benefit at Davis Vision: Before you go to a Davis outlet, you must call the Welfare Fund, 212-354-5230, to register and activate your eligibility. If you do not call the Fund first, you will not receive service.

Other Providers

Any Licensed Provider of vision services may be used as an alternative to General Vision Services or Davis Vision. The reimbursement will cover costs not to exceed \$100 every two years. Claim Forms are available [here](#) and should be submitted within 90 days of service.

Eye examinations are covered through a participating provider when made in conjunction with the purchase of glasses or contact lenses. If the purchase of corrective lenses and frames is made at a later time, there is a three-month limit in order to qualify for the balance of the benefit.

Split Services may occur if a participant obtains an examination through a vendor, then elects to have the prescription filled elsewhere or not at all (doesn't file with the Fund) Reimbursement will be limited to the initial vendor. All services must be performed within 90 days. *Special Note: Split services are not available for contact lenses.* Prescriptions for contact lenses must be filled by the provider who performs the examination.