



Vision Insurance

PROVIDED BY



Postdoctoral Benefit Program

EYEMED PPO VISION PLAN

	In-Network	Out-of-Network
Core Benefits	Postdoc Pays	
Vision Examinations	\$10 Copay	\$40 Allowance
	Every 12 Months	
Corrective Lenses	\$10 Copay	\$30 - \$70 Allowance
Conventional Contact Lenses*	\$200 Allowance (15% off remaining balance)	\$140 Allowance
Medically Necessary Contact Lenses*	\$0 Copay	\$210 Allowance
	Every 12 Months	
Frames	\$200 Allowance (20% off remaining balance)	\$140 Allowance
	Every 12 Months	

*Materials only; In lieu of corrective glasses

For more detailed plan design
information go to:

<http://clients.garnett-powers.com/pd/northwestern/>