

YOUR VISION BENEFIT

This is your Full Benefits Summary. Please bring it with you to your appointment. If you need any assistance, please call 800-VISION-1.

Additional Eyewear Discounts:
30% off any complete pair of glasses for you or family members not covered by your plan.

For Eligibility and to Utilize Your Vision Benefit:

Simply call any of the listed providers for a convenient eye exam appointment. Patient must present their benefits voucher or ID card upon service.

Any additional services that surpass the benefit are the responsibility of the patient.

Please visit our website generalvision.com and enter your benefit number (8022) to receive a complete list of all your vision benefits.

VISION BENEFITS	
EYE EXAMINATION	Every 12 Months
Eye Exam (including dilation when professionally indicated)	Included
FRAME ALLOWANCE	Every 12 Months
GVS Classic Collection *	Included
GVS Metropolitan Collection *	Included
GVS Premier Collection *	\$45 co-pay
Non-Collection Frame	\$150 allowance
SPECTACLE LENSES	Every 12 Months
Single Vision	Included
Bifocal	Included
Trifocal	Included
Oversize	Included
GVS Progressive	Included
Standard Progressive	\$50
Premium Progressive	\$80
Deluxe Progressive	\$140
Plastic Photosensitive Lenses	\$65
Polycarbonate for dependent children (up to age 19)	Included
Polycarbonate	\$30
High-Index	\$55
Intermediate Lenses	Included
Blended Segment Lenses	Included
COATINGS	Every 12 Months
Tints	Included
Ultra Violet	Included
Scratch Resistant Coating	Included
Polarized	\$75
Anti-reflective - Standard Coating	\$35
Anti-reflective - Premium Coating	\$48
Blue Light Filtering	\$25
CONTACT LENSES (In Lieu of Eyeglasses)	Every 12 Months
Non Plan Contact Lenses	\$125
Non Plan Evaluation, Fitting and Follow-up	\$50
Plan Contact Lenses	Up to 6 months supply
Plan Contact Lenses Evaluation, Fitting and Follow-up	Included
OUT-OF-NETWORK REIMBURSEMENT	
Exam	\$30
Materials (eyeglasses or contact lenses)	\$70
Full Service	\$100

Some limitations apply to additional discounts. Discounts not applicable at all in-network providers.

*The GVS Private Collection is available at most participating New York provider locations, visit generalvision.com for more information. The GVS Private Collection is subject to change.

Please note: Your provider reserves the right to not dispense materials until all member costs, fees, and co-payments have been collected.



Tell us how we're doing:
generalvision.com/survey



When you take advantage of your vision benefits, we'll donate a pair of glasses to someone in need.

SCHEDULE AN APPOINTMENT + USE YOUR BENEFIT = GVS DONATES GLASSES

GO TO: generalvision.com AND DOWNLOAD THE **GVS App**

simply enter your Benefit Number 7000 to:

- **FIND A PROVIDER**
- **SCHEDULE AN APPOINTMENT**
- **REVIEW YOUR BENEFITS**
- **VIEW VIRTUAL ID CARD**

or call **800.VISION.1** for more information



Search GVS in the App store and Register with 7000 Now! (IOS or Android Only)

DISCOVER THE VALUE OF YOUR VISION BENEFITS

GVS PLAN	SERVICE	AVERAGE RETAIL COST
INCLUDED	Eye Examination	\$60
INCLUDED	GVS Private Collection Retail	\$80
INCLUDED	Single Vision Lenses	\$99
INCLUDED	UV Coating	\$25
\$0 MEMBER COST WITH GVS BENEFIT		\$264 AVERAGE RETAIL COST WITHOUT GVS BENEFIT

VALUE ADDED SAVINGS

One Year Breakage Warranty

Repair or replacement of your plan covered spectacle lenses or Collection frame.

Mail Order Contact Lenses

Receive 15% off every contact lens purchase using code: GVS15OFF with 1800AnyLens. Call (833) 426-7536 or visit 1800anylens.com.

Hearing Program

General Hearing Services (GHS), a division of GVS, is proud to offer affordable hearing devices and services designed to provide maximum value at minimum cost (up to 50% savings on hearing devices).

LASIK

Members save 20-35% on LASIK with QualSight at more than 800 locations nationwide. Savings also available on newer technologies such as Custom Bladeless (all laser) LASIK.

Additional Savings

30% off additional eyewear or items not covered under your optical program.

For More Details

About your vision benefits, or more information about GVS, please log on to our member website generalvision.com or contact us at 800.VISION.1.

Are there any exclusions to the vision benefits?

- Your vision plan does not cover medical treatment of eye disease or injury
- Vision therapy
- Special lens designs or coatings, other than those described herein
- Replacement of lost eyewear
- Non-prescription (plano) lenses
- Contact lenses and eyeglasses in the same benefit cycle
- Services not performed by licensed personnel
- Two pair of eyeglasses in lieu of bifocals
- Colored contacts

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GVS Corporate Headquarters



@gvsbenefits



General Vision Services

