

## Vision plans for adults and families<sup>1</sup>

Routine eye exams help protect your sight and may also detect other health conditions, such as diabetes and high blood pressure. Vision plans can be purchased with or without a medical plan.

### Learn more about our vision plans

Vision plans are available for you and your family. Children can be covered up to age 26. Here are the comprehensive benefits you can expect from AmeriHealth vision plans.



### A network that goes the distance

You get access to the national Davis Vision<sup>®</sup> network, with 198,000 access points across the country, including Visionworks<sup>2</sup>, Target Optical, Pearle Vision, Warby Parker, and new this year, LensCrafters.<sup>3</sup>

**198,000** access points in the Davis Vision network



### Fully covered routine annual eye exam

When you see an in-network provider, there is no copay.



### \$0 copay and low-cost options for frames and lenses

Choose from stylish designer frames in the Davis Vision Exclusive Collection. Or use your benefit allowance to choose frames or contact lenses from in-network independent providers and retailers nationwide.

**You get an extra \$50 frame allowance and discounts on lens options at more than 750 Visionworks locations nationwide. If by day 100 you don't love your new glasses, Visionworks will exchange them.**

**Note:** All medical plans include pediatric vision care for members younger than 19.



### Fixed fee pricing on all cosmetic lens options

Your options include a wide variety of state-of-the-art lens types and lens styles.



### Discounts on other services

Take advantage of discounts on other services, such as laser eye correction, hearing exams, and name-brand hearing aid technology from Your Hearing Network.

**Stand-alone vision plans for adults ages 19 and older are available year-round, with or without enrollment in a medical plan.<sup>4</sup>**



Please see footnotes on page 3.

<b>VISION COVERED BENEFITS<sup>5</sup></b>	<b>\$100/\$150<sup>5</sup></b>	<b>\$130/\$180<sup>5</sup></b>	<b>\$150/\$200<sup>5</sup></b>
<b>FREQUENCIES</b>			
Eye exam <sup>6</sup>		12 months	
Spectacle lenses/frames		12 months/12 months	
Contact lenses		12 months	
<b>COPAYS<sup>5</sup></b>			
Eye exam/spectacle lenses	\$0/\$0	\$0/\$0	\$0/\$0
<b>FRAMES<sup>5</sup></b>			
Non-Collection frame allowance (retail) <sup>7</sup>	Up to \$100 or up to \$150 at Visionworks, plus 20% off any overage	Up to \$130 or up to \$180 at Visionworks, plus 20% off any overage	Up to \$150 or up to \$200 at Visionworks, plus 20% off any overage
Davis Vision Exclusive Collection in lieu of allowance	Fashion: \$0 Designer: \$15 Premier: \$40	Fashion: \$0 Designer: \$0 Premier: \$25	Fashion: \$0 Designer: \$0 Premier: \$0
<b>CONTACT LENSES<sup>5</sup></b>			
Collection contact lenses (in lieu of allowance)	Disposable: 4 boxes/multipack; Planned replacement: 2 boxes/multipack	Disposable: 4 boxes/multipack; Planned replacement: 2 boxes/multipack	Disposable: 8 boxes/multipack; Planned replacement: 4 boxes/multipack
Collection evaluation, fitting, and follow-up care	Covered	Covered	Covered
Non-Collection contact lenses materials allowance <sup>7</sup>	Up to \$100, plus 15% off any overage	Up to \$130, plus 15% off any overage	Up to \$150, plus 15% off any overage
Non-Collection evaluation, fitting, and follow-up care; standard and specialty lens types	15% discount	Standard: Covered in full; Specialty & disposable: \$60 program allowance; 15% discount	Standard: Covered in full; Specialty & disposable: \$60 program allowance; 15% discount
<b>TIERED PREMIUM RATES<sup>8</sup></b>	<b>MONTHLY</b>	<b>MONTHLY</b>	<b>MONTHLY</b>
Single	\$10.50	\$11.90	\$13.00
Subscriber and spouse	\$21.00	\$23.80	\$26.00
Parent and child	\$21.00	\$23.80	\$26.00
Parent and children	\$21.00	\$23.80	\$26.00
Family	\$31.50	\$35.70	\$39.00

Please see footnotes on page 3.

## Footnotes

1. Administered by Davis Vision®
2. An AmeriHealth affiliate has a financial interest in Visionworks.
3. Warby Parker, Target Optical, LensCrafters, and Pearle Vision are out-of-network for pediatric members in ACA medical plans. These providers are in-network for our stand-alone adult and family vision plan.
4. Adult Vision Care plans cover members ages 19 and older, as well as child dependents ages 19 to 26. Vision benefits for members younger than 19 are included in the medical plans.
5. All benefits displayed are in-network only. Please see your benefit booklet for out-of-network benefits.
6. Benefit is inclusive of dilation when professionally indicated.
7. Additional discounts not applicable at Walmart, Sam's Club, or Costco locations.
8. Rates are subject to change pending approval from the New Jersey Department of Banking and Insurance.

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ATENCIÓN: Si habla español, cuenta con servicios de asistencia en idiomas disponibles de forma gratuita para usted.

Llame al 1-888-968-7241 (TTY: 711). 注意: 如果您讲中文, 您可以得到免费的语言协助服务。请致电 1-888-968-7241 (TTY: 711)。

