



Contact Your  
Agent Today!



Underwritten by First Continental Life and Accident  
MESVision Network

Enrollment & Premium payment dates:  
Submitted by the 25th  
EFFECTIVE DATE: 1st of the month

Part of the Agentra Healthcare Solutions Family



**BrightIdea Vision  
Coverage**



## Lens Options

### Progressive Lenses

The member is responsible for the difference between the Covered Allowance and the Progressive Lens charge.

## Additional Lens Options

- Photochromatic: glass/plastic: pays up to \$30
- Progressive Lenses: Plan pays up to \$89.50
- Polycarbonate Lenses: Plan pays up to \$85
- Tints: Pink & Rose Covered in full

## Copays

\$10 EXAMS • \$25 EYE GLASSES (Lenses or Frames)

### Lenses (per pair) Coverage

Single Vision; Bi-focal; Tri-focal; Lenticular: 100%  
Progressive: See Lens Options

### Contact Lenses

Elective: Up to \$150  
Medically necessary: 100% covered

### Frequencies (months)

Exam/Lens/Frames: 12/24/24 \*based on date of service

## Member Rates

• Single Member:	\$14* month
• Member + Spouse:	\$25* month
• Member + Children:	\$22* month
• Family:	\$29* month

\*Includes \$0.50 Association Fee

For a complete listing of benefits, exclusions and limitations, please refer to your Policy. In the event of discrepancies contained in this brochure, the terms and conditions contained in the Policy documents shall govern. The information contained herein is accurate at the time of publication. This brochure provides only summary information.

Guaranteed Acceptance

No Waiting Period

Open Enrollment

## Additional Features

### Contact Lens Elective

Allowance includes fitting, exam, and lenses. The cost of the fitting and evaluation is deducted from the cost of the contact lens allowance. Allowance can be applied to disposables. Applies when contacts are chosen in lieu of glasses. Members can order contacts online at [MESVisionOptics.com](http://MESVisionOptics.com) and apply their benefits at checkout.

### Additional Glasses

20% off the retail price on additional pairs of prescription glasses (at Discount Program Provider Locations).

### Frame Discount

30%-35% off the remaining balance in excess of the frame allowance of \$150 biannually (Participating Provider Directory at [www.MESVision.com](http://www.MESVision.com)).

### Laser Vision Care

An average discount of 20% on LASIK and PRK. For more information Please visit [www.LasikPlus.com](http://www.LasikPlus.com) or call 1 (866) 755-2026.

To find a Participating Provider near you, please visit [MESVision.com](http://MESVision.com) and click on Search for a Provider or call (800) 877-6372.

