DIXIE COUNTY BOARD OF COUNTY COMMISSIONERS

Eye Care Highlight Sheet



Plan 1: Balanced Care Vision III Plan Summary

Deductibles	
	\$20 Calendar Year Exam, Eye Glass Lenses or Frames*
Maximum	
Calendar Year	None
Annual Eye Exam	Up to \$50
Lenses (per pair)	
Single Vision	Up to \$40
Bifocal	Up to \$60
Trifocal	Up to \$75
Lenticular	Up to \$80
Progressive	Up to \$80
Contacts	
Elective/Medically Necessary	Up to \$120
Frames	\$80
Frequencies (months)	
Exam/Lens/Frame	12/12/24
	Based on date of service***

^{*}Deductible applies to the first service received

Eye Care Plan Participant Service

Balanced Care Vision III eye care from The Standard was designed specifically for the associates of DIXIE COUNTY BOARD OF COUNTY COMMISSIONERS. The Standard makes sure there's always a friendly voice to explain your benefits, listen to your concerns, and answer your questions.

Customer Service

We also make it easy for covered employees and providers to contact us to confirm eligibility or request claims information by calling **1-800-547-9515**. Our customer service representatives are available Monday through Thursday from 5:00 a.m. until 10:00 p.m. Pacific Time and until 4:30 p.m. Pacific Time on Friday. For plan information any time, access our automated voice response system or go online to standard.com.

View plan benefit information at: standard.com

Section 125

This plan is provided as part of the Policyholder's Section 125 Plan. Each employee has the option under the Section 125 Plan of participating or not participating in this plan. If an employee does not elect to participate when initially eligible, he/she may elect to participate at the Policyholder's next Annual Election Period.

This form is a benefit highlight, not a certificate of insurance. This policy has exclusions, limitations, reductions of benefits, and terms under which the policy may be continued in force or terminated. Please contact The Standard [or your employer] for additional information, including costs and complete details of coverage.

^{***}Please submit claims within 90 days of the date of service so that the plan can consider benefits (subject to State requirements).