

Cigna Vision Solution for University of New England

Effective Date: 01/01/2024

Cigna Vision Network serviced by EyeMed offers one of the largest national routine vision networks, with optometrists and ophthalmologists at full service locations nationwide, including private practice and national and regional retail locations. Please be aware that the Cigna Vision Network serviced by EyeMed is different from the Cigna medical networks.

Vision Services and Frequency	In-Network Plan Coverage**	In-Network Member Cost***	Out-of-Network Reimbursement
Exam and Professional Services:			
Frequency*: once per 12 month			
Eye Exam	100% after \$25 Copay	\$25 Copay	Up to \$45 Allowance
Retinal Screening	\$0	Up to \$39	Not Covered
Standard Eyeglass Lenses Allowances:			
Frequency*: once per 24 month			
Lenses:	Copay: \$25		
Single Vision	100%	\$25 Copay	Up to \$32 Allowance
Lined Bifocal	100%	\$25 Copay	Up to \$55 Allowance
Lined Trifocal	100%	\$25 Copay	Up to \$65 Allowance
Lenticular	100%	\$25 Copay	Up to \$80 Allowance
Lens Enhancements / Options			
Oversize lenses	100%	\$0	Not Covered
Rose #1 and #2 Solid Tints	100%	\$0	Not Covered
Polycarbonate Lenses <19 years of age	100%	\$0	Not Covered
Standard Progressives	\$0	\$65	Not Covered
Plastic Dye Tints	\$0	\$15	Not Covered
Photochromic - Glass or Plastic	T *	\$75	Not Covered
Standard Scratch Coating	\$0	\$15	Not Covered
Standard Ultraviolet (UV) Coating	\$0	\$15	Not Covered
Anti-Reflective (AR) Coating	\$0	\$45	Not Covered
Hi-Index Lenses	\$0	20% off retail	Not Covered
All other lens options, including Premium Tiers	\$0	20% off retail	
Contact Lenses Retail Allowance:			
Frequency*: one pair or single purchase per			
24 month			
Elective	100% up to \$130 Retail Allowance	Balance over \$130 Allowance	Up to \$105 Allowance
Therapeutic	100%	\$0	Up to \$210 Allowance
Frame Retail Allowance			
Frequency*: one per 24 month	100% up to \$130 Retail Allowance	20% off balance over \$130 Allowance	Up to \$71 Allowance

^{*} Your Frequency Period begins on January 1 (Calendar year basis)

Benefits are underwritten or administered by Cigna. Read your plan carefully - this benefit summary provides a very brief description of the important features of your plans.

This is not the insurance contract. Your full rights and benefits are expressed in the actual plan documents that are available to you upon request. Network providers are independent contractors solely responsible for your routine vision examination and products.

^{**}coverage may vary at participating discount retail and membership club optical locations, please contact Customer Service for specific coverage information.

^{***}Provider participation is 100% voluntary, please check with your Eye Care Professional for any offered discounts; stated Customer Cost, up to maximums, are subject to change without notice.