

Cinnaminson Board of Education

Vision Benefits Summary

Routine Eye Exams and Vision Eyewear are covered under your Aetna medical plan when visiting a **participating** Aetna provider.

NJ Educators Health Plan Covered In Network Only:

\$15 copay for routine eye exam; Vision Eyewear: Not Applicable.

Garden State Health Plan Covered In Network Only:

\$15 copay for routine eye exam; Vision Eyewear: Not Applicable.

Aetna Patriot V Plan Covered In Network Only:

\$15 copay for routine eye exam; Vision Eyewear: \$70 once per 24 month period

Aetna Premier Plan Covered In Network Only:

\$15 copay for routine eye exam; Vision Eyewear: \$100 once per 24 month period

Routine Eye Exam Standard Guidelines schedule for direct access benefit is:

Member wears eyeglasses or contact lenses

- Members age 1 through 18- exam covered once every 12 month period.
- Members age 19 and over – exam covered once every 24 month period.

Member does not wear eyeglasses or contact lenses

- Exam covered once every 24 month period