

Your 2024 Vision Coverage at a Glance



Good vision is crucial for work and play. It is also a significant part of your health. An annual eye exam can help detect serious illnesses. You can have an exam once a year and get either frames/lenses or contacts. Learn more about your vision coverage at peba.sc.gov/vision.

	In network, you pay:	Out of network, you receive:
Comprehensive exam with dilation as necessary	A \$10 copay.	Up to \$35.
Retinal imaging	Up to \$39 .	No reimbursement.
Frames	A \$0 copay and 80% of balance over \$150 allowance.	Up to \$75.
Standard plastic lenses	A \$10 copay.	Up to \$55.
Standard progressive lenses	A \$35 copay.	Up to \$55.
Premium progressive lenses	\$35–\$80 for Tiers 1–3. For Tier 4, you pay copay and 80% of cost less \$120 allowance.	Up to \$55.
Standard contact lenses fit & follow-up	A \$0 copay.	Up to \$40.
Premium contact lenses fit & follow-up	A \$0 copay and receive 10% off retail price less \$40 allowance.	Up to \$40.
Conventional contact lenses	A \$0 copay and 85% of balance over \$130 allowance.	Up to \$104.
Disposable contact lenses	A \$0 copay and balance over \$130 allowance.	Up to \$104.

2024 Monthly premiums

If you work for an optional employer, verify your rates with your benefits office.

State Vision Plan

Employee	\$6.30
Employee/spouse	\$12.60
Employee/children	\$13.54
Full family	\$19.84



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