Community Eye Care | 2025 Vision Plan

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VISION COVERAGE	IN-NETWORK	OUT-OF-NETWORK	
Eye Exam	\$10	\$50	
Single Vision Lens	\$10	UP TO 85% OF \$175 FLEXIBLE EYEWEAR	
		BENEFIT	
Lined Bi-Focal Lens	\$10	UP TO 85% OF \$175 FLEXIBLE EYEWEAR	
	φισ	BENEFIT	
Lined Tri-Focal Lens	\$10	UP TO 85% OF \$175 FLEXIBLE EYEWEAR	
	4	BENEFIT	
Lenticular Lens	\$10	UP TO 85% OF \$175 FLEXIBLE EYEWEAR	
	φισ	BENEFIT	
Contact Lens Allowance	\$175	\$175	
Frame Allowance	\$175	\$175	
FREQUENCIES			
Exam Frequency	Every 12 months		
Lens Frequency	Every 12 months		
Frame Frequency	Every 12 months		
OUT OF NETWORK EXPLANATION	N		
	While you will receive a reimbursement when you go out of network, the out of		
	network provider may not file the claim for you.		
PLAN INFORMATION			
Plan Year	2025		
Network Name	Community Eye Care/VSP		
Member Website	www.cecvision.com		
Customer Service Phone Number	1-888-254-4290		

PREMIUM PER EMPLOYEE PAYCHEO	CK		
Employee Only		\$0.00	
Employee + Spouse		\$3.36	
Employee + Child(ren)		\$2.35	
Family		\$6.04	



Vision Insurance explanation - Meridian Airport Authority has selected Community Eye Care to carry the vision plan. Vision insurance helps cover the costs of exams, glasses and contact lenses, and may include access to discounted materials and services through a network of vision service providers. Please see the information below for more details for our 2025 Vision.

Disclaimer

Disclaimer: This is a partial listing of your covered benefits. For a complete accurate listing of covered benefits, limitations and exclusions, refer to your certificate of coverage



Vision Benefits Summary

Meridian Airport Authority



A Vision Plan for Everyone

All members enrolled in the CEC vision plan can take advantage of our simple and flexible benefits. Each plan year, you'll receive an eye exam, a flexible eyewear allowance, and a contact lens fitting.

Plan Features



Flexible Eyewear Allowance

Purchase exactly what you want—frames, lenses, contact lenses, sunglasses, special lens options, and any combination of these items. If the eyewear you want is sold in an optical shop, it's covered!



Don't Need Prescription Glasses?

Non-prescription eyewear, including blue-light blocking glasses, sunglasses, safety glasses, and readers, is covered by your CEC vision plan. Don't need prescription lenses? This is a great way to use your annual eyewear allowance!



Expansive Provider Network

CEC's network includes optometrists, ophthalmologists, and national retail optical chains, ensuring you can easily find a provider that meets your needs. Visit **cecvision.com/search** to find an in-network provider near you.



Vision Care is Important

Even if you have perfect vision, your annual eye exam is critical to your overall health and wellness. Common diseases, including glaucoma, diabetes, cardiovascular disease, and cancer, can be identified during an eye exam. Your exam is covered-in-full. You just cover the copay.



Member Portal

Our Member Portal gives you 24/7 access to find a provider, view your benefit information, check your current eligibility, print a temporary ID card, and more! Log in at:

cecvision.com/members/login.

eyeconic.

Prefer to Shop Online?

Eyeconic offers CEC members special discounts when using the promo code **CECMEMBERS**. To save online, visit:

cecvision.com/members/specialoffers/eyeconic

Your CEC Vision Benefits Summary

Company: Meridian Airport Authority

CEC Coverage Effective Date: 01/01/2025

175 PLAN

Frequency: All benefits renew every 12 months.



BENEFIT DESCRIPTION		COPAY	OUT-OF-NETWORK REIMBURSEMENT
Exam An annual routine eye exam.		\$10	Up to \$50 minus the copay
Retinal Screening	An enhancement to the annual eye exam where high-resolution images are taken of the inside of the eye to detect and monitor conditions like diabetes.	\$39	None
Eyewear	An annual \$175 flexible allowance for prescription and non-prescription eyewear. 20% discount on glasses/10% discount on contacts for any overages.	\$10	Up to 85% of flexible allowance minus the copay
Contact Lens Fitting	An annual fitting or evaluation.	\$10	Up to \$48 minus the copay

PER PAY PERIOD RATES	
Employee Only	\$0.00
Employee + Spouse	\$3.36
Employee + Child(ren)	\$2.35
Employee + Family	\$6.04

ADDITIONAL SAVINGS		
Additional Pairs of Glasses or Contacts	Members receive a 20% savings on additional pairs of prescription and non-prescription glasses, and 10% savings on contact lenses, from any CEC in-network provider within 12 months of their last eye exam.	
LASIK Discounts	Members can save up to 50% from participating QualSight LASIK providers, including TLC Laser Eye Center.	
Special Offers	A variety of special offers are available to CEC members. Visit cecvision.com/members/special-offers for additional information!	

Benefits may vary by location.

CEC Community Eye Care is a registered trademark of VSP Vision.

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Questions about your benefits?

Visit us online at **cecvision.com** or call **888-254-4290**.