



Town of Braintree

(Insight Network)

SUMMARY OF BENEFITS

VISION CARE SERVICES	IN-NETWORK MEMBER COST AT PLUS PROVIDERS	IN-NETWORK MEMBER COST	OUT-OF-NETWORK MEMBER REIMBURSEMENT
EXAM SERVICES			
Exam	\$0 copay	\$10 copay	Up to \$57
Retinal Imaging	Up to \$39	Up to \$39	Not covered
CONTACT LENS FIT AND FOLLOW-UP			
Fit and Follow-up - Standard	Up to \$40; contact lens fit and two follow-up visits	Up to \$40; contact lens fit and two follow-up visits	Not covered
Fit and Follow-up - Premium	10% off retail price	10% off retail price	Not covered
FRAME			
Frame	\$0 copay; 20% off balance over \$200 allowance	\$0 copay; 20% off balance over \$150 allowance	Up to \$120
STANDARD PLASTIC LENSES			
Single Vision	\$25 copay	\$25 copay	Up to \$47
Bifocal	\$25 copay	\$25 copay	Up to \$79
Trifocal	\$25 copay	\$25 copay	Up to \$113
Lenticular	\$25 copay	\$25 copay	Up to \$113
Progressive - Standard	\$80 copay	\$80 copay	Up to \$73
Progressive - Premium Tier 1 - 4	\$110 - 240 copay	\$110 - 240 copay	Up to \$95
LENS OPTIONS			
Anti Reflective Coating - Standard	\$45	\$45	Up to \$23
Anti Reflective Coating - Premium Tier 1 - 3	\$57 - 100	\$57 - 100	Up to \$23
Photochromic - Non-Glass	\$75	\$75	Not covered
Polycarbonate - Standard	\$40	\$40	Not covered
Polycarbonate - Standard < 19 years of age	\$0 copay	\$0 copay	Up to \$22
Scratch Coating - Standard Plastic	\$15	\$15	Not covered
Tint - Solid and Gradient	\$15	\$15	Not covered
UV Treatment	\$15	\$15	Not covered
All Other Lens Options	20% off retail price	20% off retail price	Not covered
CONTACT LENSES			
Contacts - Conventional	\$0 copay; 15% off balance over \$150 allowance	\$0 copay; 15% off balance over \$150 allowance	Up to \$120
Contacts - Disposable	\$0 copay; 100% of balance over \$150 allowance	\$0 copay; 100% of balance over \$150 allowance	Up to \$120
Contacts - Medically Necessary	\$0 copay; paid in full	\$0 copay; paid in full	Up to \$300
ADDITIONAL GLASSES ALLOWANCE			
Glasses Allowance	40% off retail price less \$100 allowance	40% off retail price less \$50 allowance	Up to \$40
OTHER			
Hearing Care from Amplifon Network	Up to 64% off hearing aids; call 1.877.203.0675	Up to 64% off hearing aids; call 1.877.203.0675	Not covered
LASIK or PRK from U.S. Laser Network	15% off retail or 5% off promo price; call 1.800.988.4221	15% off retail or 5% off promo price; call 1.800.988.4221	Not covered
FREQUENCY			
	ALLOWED FREQUENCY - ADULTS	ALLOWED FREQUENCY - KIDS	
Exam	Once every plan year	Once every plan year	
Frame	Once every plan year	Once every plan year	
Lenses	Once every plan year	Once every plan year	
Contact Lenses	Once every plan year	Once every plan year	
Glasses Allowance	Once every plan year	Once every plan year	

(Routine benefit: Plan allows member to receive either glasses (frame, lens, lens options), or contacts. Additional Glasses Allowance: Plan allows member to receive glasses (frame and/or lens, lens options).

*Complete pair (frame & lens with or without lens options) purchase required to receive 40% discount. 20% discount applied if complete pair not purchased. PLUS Providers not available in all states.

EyeMed reserves the right to make changes to the products available on each tier. All providers are not required to carry all brands on all tiers. For current listing of brands by tier, call 866.939.3633. No benefits will be paid for services or materials connected with or charges arising from: medical or surgical treatment, services or supplies for the treatment of the eye, eyes or supporting structures; Refraction, when not provided as part of a Comprehensive Eye Examination; services provided as a result of any Workers' Compensation law, or similar legislation, or required by any governmental agency or program whether federal, state or subdivisions thereof; orthoptic or vision training, subnormal vision aids and any associated supplemental testing; Aniseikonic lenses; any Vision Examination or any corrective Vision Materials required by a Policyholder as a condition of employment; safety eyewear; solutions, cleaning products or frame cases; non-prescription sunglasses; plano (non-prescription) lenses; plano (non-prescription) contact lenses; two pair of glasses in lieu of bifocals; electronic vision devices; services rendered after the date an Insured Person ceases to be covered under the Policy, except when Vision Materials ordered before coverage ended are delivered, and the services rendered to the Insured Person are within 31 days from the date of such order; or lost or broken lenses, frames, glasses, or contact lenses that are replaced before the next Benefit Frequency when Vision Materials would next become available. Fees charged by a Provider for services other than a covered benefit and any local, state or Federal taxes must be paid in full by the Insured Person to the Provider. Such fees, taxes or materials are not covered under the Policy. Allowances provide no remaining balance for future use within the same Benefit Frequency. Some provisions, benefits, exclusions or limitations listed herein may vary by state. Plan discounts cannot be combined with any other discounts or promotional offers. In certain states members may be required to pay the full retail rate and not the negotiated discount rate with certain participating providers. Please see online provider locator to determine which participating providers have agreed to the discounted rate. Underwritten by Fidelity Security Life Insurance Company of Kansas City, Missouri, Policy number VC-19, form number M-9083, or Policy number VC-146, form number M-9184, in New York underwritten by Fidelity Security Life Insurance Company of New York, Policy Number VCN-1, form number MN-1, or Policy Number VCN-19, form number MN-28. This is a snapshot of your benefits. The Certificate of Insurance is on file with your employer.

Find your best fit



These eye doctors are nearby – which is right for you?
Check eyemed.com/member or the EyeMed App (App Store or Google Play) for a more advanced search. You'll see who has the hours you like, the services you need and the eyewear you want.

Locations near 02184 for the Insight network

LENSCRAFTERS AT MACYS
250 GRANITE ST
BRAintree, MA 02184
781-348-1815

TARGET OPTICAL
BRAintree
250 GRANITE ST
BRAintree, MA 02184
781-817-8820

LENSCRAFTERS
SOUTH SHORE PLAZA
250 GRANITE ST
STE 2069 UPPER LEVEL
BRAintree, MA 02184
781-380-4300

TARGET OPTICAL
1 HAWES WY
STOUGHTON, MA 02072
781-436-7115

TARGET OPTICAL
1 HAWES WAY
STOUGHTON, MA 02072
781-436-7115

TARGET OPTICAL
221 UNIVERSITY AVE
WESTWOOD, MA 02090
781-410-6947

LENSCRAFTERS
POINTS WEST PLAZA
21 TORREY ST
STE A
BROCKTON, MA 02301
508-580-8901

LENSCRAFTERS
PROVIDENCE HIGHWAY
870 PROVIDENCE HWY
DEDHAM, MA 02026
781-329-6080

TARGET OPTICAL
7 ALLSTATE RD
BOSTON, MA 02125
617-514-1230

LENSCRAFTERS
37 NEWBURY ST
BOSTON, MA 02116
617-437-1070

C E OPTICAL CO
820 WASHINGTON ST
BRAintree, MA 02184
781-848-7741

ADELE SAN CLEMENTE OD
823 WASHINGTON ST
BRAintree, MA 02184
781-848-7522

HARVARD VANGUARD MEDICAL
ASSOC
111 GROSSMAN DR
BRAintree, MA 02184
781-849-2295

KING OPTICAL CO INC
20 SCHOOL ST
BRAintree, MA 02184
781-843-2133

MASS OPTOMETRIC ASSOCIATES
250 GRANITE ST
SPACE 1041 C
BRAintree, MA 02184
781-843-0586

FAMILY VISION CTR
283 WASHINGTON ST
WEYMOUTH, MA 02188
781-335-0223

BLUE HILLS EYE ASSOCIATES
340 WOOD RD
STE 2020
BRAintree, MA 02184
781-794-2200

NIelsen EYE CENTER
541 MAIN ST
STE 110
WEYMOUTH, MA 02190
617-471-5665

NIelsen EYE CENTER
300 CONGRESS ST
STE 201
QUINCY, MA 02169
617-471-5665

OPHTHALMIC CONSULTANTS OF
BOSTON
1900 CROWN COLONY DR
STE 301
QUINCY, MA 02169
617-770-4400

GRANITE MEDICAL GROUP
500 CONGRESS ST
3C
QUINCY, MA 02169
617-471-0033

OPHTHALMIC CONSULTANTS OF
BOSTON
97 LIBBEY PKWY
STE 100
WEYMOUTH, MA 02189
781-331-3300

MASS OPTOMETRIC ASSOCIATES
AT CAMBRIDGE EYE DOCTORS
1 SCAMMELL ST
QUINCY, MA 02169
617-773-1353

DR SANI & ASSOCIATES
978 MAIN ST
WEYMOUTH, MA 02190
781-337-0674

FOR EYES OPTICAL
SOUTH WEYMOUTH
35 PLEASANT ST
UNIT 40
WEYMOUTH, MA 02190
781-337-0753

EYES ON RANDOLPH LLC
1157 N MAIN ST
RANDOLPH, MA 02368
781-963-2333

MYEYEDR
104 QUARRY ST
STE 3
QUINCY, MA 02169
617-481-6650

CODMAN EYE CARE AFFILIATES
9 WARREN ST
RANDOLPH, MA 02368
781-963-8448

GAIL S MARCHETTO OD
1132 MAIN ST
WEYMOUTH, MA 02190
781-878-2300

MYEYEDR
27 MEMORIAL PKWY
RANDOLPH, MA 02368
781-986-7400

COMFORT VISION INC
543 WASHINGTON ST
QUINCY, MA 02169
617-657-0205

HARVARD VANGUARD MEDICAL
ASSOC
PRESIDENTS PLACE
1250 HANCOCK STREET
QUINCY, MA 02169
617-774-0780

HARVARD VANGUARD MEDICAL
ASSOC
PRESIDENTS PLACE
1250 HANCOCK ST
QUINCY, MA 02169
617-774-0780

LIFETIME VISION
1219 HANCOCK ST
QUINCY, MA 02169
617-481-1857

PEARLE VISION
470 SOUTHERN ARTERY
QUINCY, MA 02169
617-773-8050

MCALear EYE CARE
1638 MAIN ST
WEYMOUTH, MA 02190
781-331-4004

MAIDA P ANTIGUA MD
160 OLD DERBY ST
STE 451
HINGHAM, MA 02043
603-673-9411

LUNETTE OPTIC
92 DERBY ST
STE 135
HINGHAM, MA 02043
781-741-8100

OPHTHALMIC CONSULTANTS OF
BOSTON
MILTON HOSPITAL MED BUILDING
100 HIGHLAND ST
STE 205
MILTON, MA 02186
617-696-0750

MANET COMMUNITY HEALTH
CENTER
110 W SQUANTUM ST
QUINCY, MA 02171
617-376-3000

Eye exams offered by DPA/DTA or DEA-certified optometrists and ophthalmologists. All certifications are verified by and NCQA-accredited credentials verification organization. Locations subject to change. When making your appointment, please confirm all discounts and services are offered.



LENSCRAFTERS

