

Voluntary Group Vision Lincoln Financial Group 2019-2020 Plan Year

Provider Network Lincoln VisionConnect® proudly partners with Spectera Eyecare Network for all of your needs.

Be sure to advise your provider your benefits are covered under Spectera!

You may choose any provider; however using providers in our network should lower your out-of-pocket expenses.

A list of participating providers may be accessed at <http://lvc.lfg.com> or by calling toll-free at 1-800-440-8453.

	In Network	Out of Network
Exam Frequency	\$10 Copay Every 12 Months	Up to \$40 Every 12 Months
Lenses Single/Bifocal/Trifocal Frequency	\$25 Copay Every 12 Months	\$40 / \$60 / \$80 Every 12 Months
Frames Frequency	\$130 Allowance + 30% Every 12 Months	Up to \$45 Every 14 Months
Contact Lenses Conventional Contact lenses Medically Necessary Frequency	\$25 Copay \$25 Copay Every 12 Months	\$125 Allowance \$210 Allowance Every 12 Months
Child Age Limit	26	

\$125 allowance for contacts at Walmart, Sam's Club and Costco, not a \$25 Copay as listed above.