

The vision benefit is included for the convenience of the student and is separate from, and in no way affects, the coverage provided by the Student Health Insurance Plan (SHIP).

- The Vision Plan is part of the benefits provided to all students insured by the Student Health Insurance Plan (SHIP) and cannot be purchased separately.
- This plan has the same effective dates as your SHIP plan.
- These are separate benefits provided for you in addition to (but not included in) the SHIP policy benefits.
- You must utilize only the providers retained by UC Riverside, who are listed.
- These providers, fees may be subject to change.

This plan is not administered by Personal Insurance Administrators, Inc. Contact UC Riverside CHC for details.

Health Insurance Office

If you have questions about this supplemental plan, please contact the UC Riverside Student Health Insurance Office.

Phone: (951) 827-5683Fax: (951) 827-7171



2010-2011

STUDENT HEALTH INSURANCE VISION BENEFIT

VISION PROVIDERS FOR USHIP AND GSHIP

VISION PLAN	
BENEFIT	STUDENT PAYS
Examination and Pre for Glasses	scription \$8
Contact Lenses \$125 for contact lens et and lenses	xam, fitting,
Glasses Includes S.V. plastic let	nses \$20
Eye Examination: Once every school year	r
Glasses or Contact Le Once every school year	
The vision benefit app contact lenses or glass within the same plan	ses, but not both,

		Hours: M-F 9-5	
Benefit Studen		at Pays	
Standa	rd Examinatio	n for Glasses	\$8
Eye Gla	asses		
Frames	- Standard Li	ne Based Price	\$20
	Upgrades a	vailable (\$39 - ?)	
Lenses:			
		Plastic Lenses	\$40
	Lined Bifocal		\$55
		ressive Lenses, Plastic	\$116
	Lined Trifoca		\$89
		ic/Transitional	\$64
	Tint Solid		\$16
	Coating Solid		\$24
	UV Protection	-	\$16
	Polarized Len		\$89
		ant coating (front surface)	\$15
		ant Coating (front/back surface)	\$27
	Anti-reflective	0	\$56
	Roll and polis	e	\$20
		lens curvature (lab quote)	varies
		lens size (oversize)	\$14
		Lens Size (Oversize, Bifocal)	\$20
	Medium index		\$45 \$70
	High index pl		\$70
	Polycarbonate	e (includes UV & scratch coat)	\$44
		5 allowance –exam, fitting, & lense	1 A A A A A A A A A A A A A A A A A A A
Conven		(does not include contacts)	\$148
Disposa		(does not include contacts)	\$148
	as Permeable	(does not include contacts)	\$148
Soft-Co	lor Disposable	(does not include contacts)	\$148

Dr. Ralph Salisbury 1450 University Avenue, #D

Al l contact lens prices include, exam, fitting, follow up care, instructions and care kit

Dr. Jeffrey Ling 2712 Canyon Springs Pkwy., #4 Riverside, CA 92507 (951) 656-2288

Bene	Hours: M/T/TH/F 10-6, Sat. 10-4 efit S	tudent Pays
Standar	d Examination for Glasses	\$8
Eye Gla	sses	
Frames	- Standard Line Based Price Upgrades available (\$50—\$500)	\$20
Lenses:		
	Single Vision Lenses	\$60
	Single Vision Plastic Lenses	\$95
	Lined Bifocals (Plastic)	\$95
	Lined Bifocals (Poly)	\$130
	Progressive Bifocals (Plastic/Poly)	\$160/195
	Lined Trifocals (Plastic)	\$115
	Lined Trifocals (Poly)	\$150
	Progressive Trifocals (Plastic/Poly)	\$160/195
	Photochromatic/Sun Sensor	\$100
	Tint/tint coating	\$20
	UV Protection	\$15
	Polarized Lenses	\$50
	Scratch resistant coating	\$20
	Anti-reflective coating	\$70
	Roll and polish edges	\$20
	Non-standard lens curvature	\$20
	Non-standard lens size (oversize)	\$20
	Medium index plastic	\$75
	High index plastic—(add on SV)	\$135

Conventional- (includes	s I pr. Soft Contacts, varies by brand))	\$213
Disposable	(includes 4 boxes/2wk disposable)	\$225
Hard-Gas Permeable	(includes 1 pair Contacts)	\$605
Soft-Color Disposable	(includes 4 boxes/2wk disposable)	\$281

Al l contact lens prices include, exam, fitting, follow up care, instructions and care kit

Dr. Edward Cooper 1345 University Avenue Riverside, CA 92507 (951) 682-8190

Hours: M/T/TH/F 9-5, Sat., 9-1 Benefit Student Pays		nt Pays
	rd Examination for Glasses	\$8
Eye Gla		
Frames	Standard Frame & single vision plastic lenses Upgrades available at additional cost	\$20
Lenses:		
	Glass Lenses	\$20
	Lined Bifocals	\$30
	Lined Trifocals Plastic	\$115
	Progressive plastic, no line trifocal	\$160
	and up depending	on brand
	Photochromatic/Transitions	\$60/\$90
	Polarized Lenses	\$95
	Tint	\$25
	UV Protection	\$20
	Scratch resistant coating	\$20
	Anti-reflective coating	\$75
	and up depending of	
	Roll and polish edges	\$30
	Polycarbonate—includes scratch coat	\$50
	High Rx—Price varies on prescription	
	Non-standard lens curvature	\$10
	Non-standard lens size (oversize)	\$20
	Medium index lenses plastic	\$90
	High index lenses plastic	\$110
		And up
	t Lenses (Price does not include contacts)	
Conven		\$119
Disposa		\$119
	as Permeable	\$150
Soft-Co	lor Disposable	\$119

Al l contact lens prices include, exam, fitting, follow up care, instructions and care kit

Dr. Gary Fishberg 5225 Canyon Crest Dr., #201 Riverside, CA 92507 (951) 788-2020

Benefit		Student Pays
Standard Examination	for Glasses	\$8
Eye Glasses		
Frames - Standard Line	e Based Price	\$20
Upgrades ava	ilable (\$69—\$300)	
Lenses:		
Single Vision L		\$49
Single Vision P	lastic Lenses	\$49
Lined Bifocals		\$89
Lined Bifocals		\$89
Progressive Bifocals		\$189
Lined Trifocals		\$129
Lined Trifocals Plastic		\$129
Progressive Trifocals		\$189
Photochromatic		\$80
Tint/tint coating	5	\$15
UV Protection		\$25
Polarized Lense	es	\$89
Scratch resistan		\$25
Anti-reflective		\$50
Roll and polish	2	\$25
Non-standard lens curvature		\$20
Non-standard lens size (oversize)		\$20
Medium index plastic		\$165
High index plas	tic	\$189
Contact Lenses (\$125		ig, & lenses)
Conventional	(includes 4 boxes)	\$239
Disposable	(includes 4 boxes)	\$239
Hard-Gas Permeable	(includes 1 pair)	\$329
Soft-Color Disposable	(includes 4 boxes)	\$319

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