UFCW LOCAL 1500 WELFARE FUND VISION FEE SCHEDULE EFFECTIVE MARCH 1, 2021

SERVICE	FEE SCHEDULE
Eye Examination	
Without Ophthalmological tests	\$16.00
With Ophthalmological tests	\$32.00
Lenses	
Single Vision Lenses*	\$56.00
Bifocal Lenses*	\$84.00
Trifocal Lenses*	\$140.00
Progressive Lenses*	\$140.00
Lenticular (cataract) Lenses*	\$166.00
*Maximum for 2 Lenses	
Contacts	
Daily Wear (Vile) Contact lenses (in lieu of lenses and frames)	\$200.00
Disposable Wear Contact lenses (in lieu of lenses and frames)	\$200.00
Frames	\$70.00