

Benefits	What You Pay With Original Medicare	What You Pay With the Dual Advantage Plan with Medicare and full Medicaid
<b>Vision (includes glasses and contact lenses)</b>	You pay 20% coinsurance for Medicare-approved amounts Routine eye exams not covered Medicare pays for 1 pair of eyeglasses or contact lenses after cataract surgery	\$0 copayment for Medicare-covered benefits \$0 copayment for routine eye exam \$0 copayment; \$200 annually towards eyewear
<b>Dental Care</b>	You pay 20% coinsurance for Medicare-approved amounts Routine dental not covered Dentures not covered	\$0 copayment for Medicare-covered benefits \$0 copayment for dentures - 2 dental plates, either full or partial, once every 3 years; denture adjustments \$0 copayment for a routine preventive office visit (oral exams, cleanings, X-rays)