

Benefits	What You Pay With Medicare Advantage Only
Vision Services: <ul style="list-style-type: none"> • Routine Eye Exam (1) per year • Annual Glaucoma Screening • Diagnosis and Treatment for diseases/conditions of the eye • Contact lenses, eyeglasses (lenses and frames) 	<p>\$10 copayment</p> <hr/> <p>\$0 copayment</p> <hr/> <p>\$50 copayment</p> <hr/> <p>\$150 yearly allowance</p>
Preventive Dental covers: Up to (1) of each of the following <ul style="list-style-type: none"> • Office Visit (1) per year <ul style="list-style-type: none"> • Oral Exam (1) per year • Cleaning (1) per year • Dental x-rays (1) per year 	<p>\$10 copayment</p>