

Proposal Presented to

Lehigh Area School District – Support Staff (Revised 09/15/2026)
1000 Union Street
Lehigh, PA 18235

Proposal Presented by

VBA
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Things To Know

Proposed Effective Date: 10/01/2026

Initial Term: 24 Months

Rates

This proposal is based on the effective date noted and is valid for 90 days from the proposal date up to the effective date. Quoted fully-insured premium rates are guaranteed for 24 months, unless otherwise specified. The presence of any rate guarantee is not a guarantee to renew the contract. All rates provided are monthly.

- **Option 1** assumes the *Employer* will pay 100% of the premium.

Guarantee Limitations

VBA reserves the right to recalculate the rates/fees in the event of any of the following:

- Requested change in effective date;
- The final benefit provisions, account structure, or services differ from those contained in this proposal;
- The number of eligible employees increases or decreases by more than 10% from the census reflected in this proposal;
- Final enrollment does not meet minimum participation requirements;
- The enactment or proposed enactment of any legislation or regulations that would affect the benefits, and contractual terms contemplated by this proposal; and
- The imposition of any governmental tax or assessment which is measured by the services performed or payments made by VBA in connections with this proposal.

Services Included in Rates and Fees

- Online invoicing (exceptions apply)
- Online, custom Member ID Cards available through the VBA Member Portal
- Full single-site plan administration including claims processing, customer service, eligibility maintenance, provider relations, network management, professional claim review, underwriting/actuarial, billing, legal/contract, financial reporting from VBA's Pittsburgh, Pennsylvania call center

- Secure Internet enrollment inquiry. Update capability available for groups not sending enrollment files
- Web-based member access to provider directories, benefits, eligibility and claim status information
- Toll-free customer service number
- Client customized enrollee communications piece
- Standard management reports at the interval the Client specifies
- Preparation of vision benefits booklets/certificates of coverage
- Administrative forms, including eye doctor nomination forms
- Plan performance reviews with VBA account manager
- Consultation with VBA's professionals on vision plan-related issues
- Electronic enrollment files accepted for groups with 100 or more eligible employees
- SOC 2 report available upon request
- Form 5500 Schedule A reporting available upon request
- Claim Lag reports available upon request for self-funded groups only

Services Not Included in Rates and Fees

- Customized provider directories
- Paper provider directories for every plan participant
- Mailings of benefit booklets/certificates of coverage or Member ID Cards to enrollees' homes
- Customized claim forms
- Customized EOBs
- Claim run-in/run-out
- Client-specific "dedicated" toll-free number
- Client-specific satisfaction surveys
- Payment by credit card

Commission

Fully insured PPO rates include net commissions.

Leighton Area School District – Support Staff

Number of Employees: 240
\$0 Exam / \$0 Materials Copay
Dependent Age: 26 (EOBM)

Frequency Type: Last Date of Service
Vision Exam
Lenses
Frames

Employee
12 Months
12 Months
24 Months

Spouse
12 Months
12 Months
24 Months

Children
12 Months
12 Months
24 Months

Benefits: Employee Can Select Either
Vision Exam (Glasses or Contacts)
Retinal Screening with Exam
Clear Standard Lenses (Pair):
Single Vision
Bifocal
Blended Bifocal
Trifocal
Progressives (Basic)
Progressives (Standard and Premium 1-4)
Lenticular
Polycarbonate
Basic Scratch Coating
Frame (Wholesale Allowance)
-OR-
Elective Contacts (in lieu of eyeglass benefits)
Material Allowance
Elective Fitting Fee and Evaluation
-OR-
Medically Necessary Contacts
-AND-
Lasik Surgery (once every 8 years)

VBA Participating Provider Amount Covered/Benefit
Covered in Full
Copay not to exceed \$39
Covered in Full
Covered in Full
Covered in Full
Covered in Full
Covered in Full
Partially-Covered
Covered in Full
Covered in Full for Persons Up to Age 19
Covered in Full
Up to \$50 ^A
Up to \$125 ^B
15% off UCR
Covered in Full ^C
N/A

Out-of-Network Max Reimbursement (Zero Copay)
\$40
N/A
\$40
\$60
\$60
\$80
\$80
\$80
\$120
N/A
N/A
\$50
\$125
N/A
\$450
\$125

Where an "allowance" is shown above, the Member is responsible for paying any charges in excess of the allowance less any applicable copay.

Benefits and participation may vary by location, including, but not limited to, Costco® Optical, Pearle Vision, LensCrafters®, Target Optical®, Eyeglass World® and America's Best®.

A Approximately \$125 to \$150 retail.

B The allowance is applied to all services/materials associated with contact lenses, including, but not limited to, contact fitting, dispensing, cost of the lenses, etc. No guarantee the allowance will cover the entire cost of services and materials.

C Requires prior approval. May only be selected in lieu of all other material benefits listed herein.

Cost Per Employee Per Month

Composite Rate

\$9.36

Member Out-of-Pocket Maximum

Progressive Lenses (Partially-Covered)

Standard Progressive	\$65	Premium 3 Progressive	\$175
Premium 1 Progressive	\$90	Premium 4 Progressive	\$220
Premium 2 Progressive	\$130		

Anti-Reflective Coatings (Not Partially or Fully Covered)

Standard A/R 1	\$31	Premium A/R 2	\$81
Standard A/R 2	\$52	Ultra A/R	\$94
Premium A/R 1	\$69		

Other Services and Materials (Not Partially or Fully Covered)

Digital Retinal Screening	\$39	UV 400	\$12
Blue Protection Material	\$15	Mid-Index/Trivex	\$40 - \$50
Polycarbonate (19 & Over)	\$16 SV \$27 MF	High Index	\$78 - \$120
Digital Surfacing, Single Vision	\$48 - \$80	Photochromic	\$62 - \$136
Polarized	\$56 - \$66	Mirror Coating	\$35
Color Coating	\$23	Edge Treatments	\$10 - \$13
Near Variable Focus	\$40	Premium Scratch	\$10 - \$30
Rimless Mounting	\$8 - \$28	Solid or Gradient Tint	\$10

VBA reserves the right to add, modify or delete any of the prices or products available on each tier without notice to any party, member, covered insured or other person or entity. Maximum charges apply only to materials and services obtained through In-Network Providers. In-Network Providers are not required to carry all brands on all tiers. Benefits and participation may vary by location.

This plan is designed to cover your visual needs rather than cosmetic options.

Additional Charges

You may incur out-of-pocket charges when selecting any of the following:

- Tinted Lenses
- Photochromic/Polarized Lenses
- Polycarbonate (covered under age 19)
- Hi-index Lenses
- Progressive (available starting at \$29)
- The coating of the lens or lenses (except Basic Scratch Coating)
- A frame that costs more than the plan allowance
- Rimless Frames
- Anti-Reflective

Additionally, costs for contact lenses/services in excess of the plan's scheduled reimbursement allowances are the responsibility of the patient.

Not Covered

The contract gives VBA the right to waive any of the plan limitations if, in the opinion of our optometric consultants, it is necessary for the patient's welfare. VBA provides no benefit for professional services or materials connected with the following:

- Orthoptics or vision training
- Non-prescription lenses
- Two pair of glasses in lieu of bifocals
- Medical or surgical treatment of the eyes
- An eye examination, or corrective eyewear, required by an employer as a condition of employment
- Services of materials provided as result of any Worker's Compensation Law or similar legislation
- Glasses and contacts during the same eligibility period

Lenses and frames furnished under this program which are lost or broken will not be replaced except at the normal intervals when services are otherwise available.

Additional Terms and Conditions

Frame allowance is based on wholesale pricing at non-retail locations. Frame allowance, contact lens pricing and policies vary by location. Contact your provider before requesting services.

Benefits may only be used for contact lenses when selected in lieu of eyeglasses (spectacle lenses and frames). If purchased at the same time from a single provider, your plan will cover up to \$125 towards the cost of contact fitting fees and contact lenses. Any provider contact lens charges that exceed this amount shall be the responsibility of the member. Members may be required to pay contact fitting fees out of pocket at some locations.

Benefits and participation may vary by location and where prohibited by state law.

LASIK benefits may be limited to no more than 50% per eye.

A 15% discount off the provider's usual, customary and reasonable contact lens fitting fee may be available in some locations. Void where prohibited by law.

Benefits may only be used for medically necessary contact lenses when selected in lieu of all other materials.

Additional terms and conditions apply. Contact VBA at 412-881-4900 for more information.

Background

Our Mission

The ability to see clearly is key to optimal living and quality of life for all people and extends beyond health to every person's ability to participate in and contribute to society. VBA's mission is to improve the human experience by utilizing innovative models of service, delivery and advocacy to reduce barriers to high-quality eye care.

Improving the Human Experience

VBA vision products offer members access to fundamental vision care. Through vision care exams, doctors are able to help members see clearly.

A Personal Approach

Everyone gets a uniquely personal approach to vision benefits with VBA's customized plans, personalized service and the latest products. Whether you're a member, administrator, broker, provider or lab, working with VBA is a simple process. At VBA, you're our focus.

Since 1965, we've provided comprehensive vision coverage to corporations, municipalities, schools, health and welfare funds, hospitals and health maintenance organizations in Pennsylvania.

Our focus on personalized service has helped us build and maintain long-term relationships — like the one we still have with our first customer that joined us more than 60 years ago.

Coverage for Those Who Need It Most

The Pennsylvania Vision Foundation, an affiliate of VBA, was founded in 2007 to provide eye care, including vision care exams, prescription lenses and frames, to those in need. To date, the foundation has proudly assisted more than 14,000 uninsured Pennsylvanians.

Choose VBA Vision

VBA offers:

- Tailored plan designs featuring custom underwriting for companies with as few as 10 employees;
- Plans that allow for contacts and frames within the same contract period;
- A growing network of ophthalmologists, optometrists and retail providers for your employees to access.

Simplicity & Support

We pride ourselves on keeping things simple for you and your employees. Your employees can call, email or chat instantly with us.

Scope & Scale

VBA offers customized plan designs and custom underwriting for companies of 10 or more employees. Our plans include a vast network of access points—more than 80,000 for vision including optometrists, ophthalmologists and retailers.

Support from expert representatives

At VBA, our representatives are available to offer sound advice and helpful information. Our consultative approach can guide both you and your clients through any aspect of selecting vision benefits.

Coverage that Counts

VBA covers vision care exams for your employees so that they can stay healthy and see clearly. By taking advantage of these regular exams, providers can detect any potential issues early and begin treatment, ensuring your employees' eyes are as healthy as possible.

Vision Care Exams

Vision care examinations are vital to maintaining good visual health. Including a vision care exam in benefits packages may reduce medical costs.

Frames

Knowing that frames often double as a statement of fashion, VBA works with you to determine a frame allowance. Our frame allowance gives your team members the flexibility to select frames that meet their budget and sense of style.

Lenses

Lens technology can give your employees clear vision—from daily tasks to special life moments. VBA works with you to determine the lens treatments and designs to meet those needs. From blue-light blocking coatings to fully-covered progressive lenses, our plans can give access to the lenses that help your team live their best lives.

Elective Contact Lenses

Contact lenses are often selected as an alternative to frames. VBA will work with you in selecting an elective contact lens allowance to give your employees the flexibility to meet their price point and preferences.

Optional Covered Materials

Looking to offer more? VBA gives you the flexibility to include additional options such as progressive lenses, photochromic lenses and anti-reflective coatings.

Values in Vision...and Beyond

VBA's values are a core part of our company, setting the foundation for everything we do today and into the future.

- Integrity – We do the right thing at all times.
- Dependability – We are accountable, reliable and deliver on our promises.
- Loyalty – We are passionate about your employees and their vision care needs.
- Respect – We appreciate everyone's differences and respect varying points of view.
- Family – We put family first and understand that your company and your employees do the same.
- Energy – We infuse energy into everything we do.
- Teamwork – We collaborate with each other and with you.
- Excellence – We make every effort to exceed expectations.
- Learning and Improvement – We are always seeking ways to better our products and services.