



SOUTHLAND BENEFIT SOLUTIONS



To search for dental and vision providers in the Southland network, scan the QR code.



SUMMARY OF VISION PLAN

Vision Allowances	Benefit
Eye Exam	\$95
AND	
Frames	\$95
Lenses-Single Vision	\$100
Lenses-Bifocal	\$130
Lenses-Trifocal	\$180
Lenses-Lenticular	\$180
OR	
Refractive Surgery (Per Eye)	\$180
OR	
Contacts	\$180

Premium	Rate
Single	\$12
Family	\$20

- Examinations:** One in any plan year.
Only **one of the following** in a plan year:
- **Contacts:** One new prescription or replacement, OR
 - **Frames and Lenses:** One new or replacement frame and one new lens prescription or replacement, OR
 - **Refractive Surgery:** One surgery per eye.

SUMMARY OF DENTAL PLAN

	Employee Only	Family Plan
Benefits per person per year	\$1,250	\$1,000
Deductible-Preventative & Diagnostic	\$0	\$0
Deductible-Basic & Major Services	\$0	\$25
Preventative Services-Exams, Cleanings, X-rays, Emergency Visits	100%	100%
Basic & Major Services-Fillings, Oral Surgery, Periodontics, Endodontics, Dentures, Crowns, General Anesthetics	80%	60%

Premium	Rate	Deductible
Single	\$44	\$0
Family	\$44	\$25

Enrollment in either the vision or dental plan through Southland entitles the subscriber and their family to a **discounted hearing network** through TruHearing.

