VISON PLAN FOR IOWA FARM BUREAU

INSIGHT-PREFERRED

VISION CARE SERVICES	In-Network Member Cost	Out-of-Network Allowance
Benefit Frequency		
Contact Lenses or Lens	Once every calendar year	
Exam		
Frame		
Exam		
Exam	$10 copay	Up to $35
Dilation	$0	N/A
Eye Exam Refraction	$0	N/A
Frames	80% of balance over $130	Up to $65
Lens		
Single Vision	$10 copay (standard plastic)	Up to $25
Bi-focal	$10 copay (standard plastic)	Up to $40
Tri-focal	$10 copay (standard plastic)	Up to $55
Standard Progressive Lens	$75 copay	Up to $40
Premium Progressive Lens		
- Tier 1	$95 copay	Up to $40
- Tier 2	$105 copay	Up to $40
- Tier 3	$120 copay	Up to $40
- Tier 4	$75 copay, plus 80% of charge less $120	Up to $40
Lenticular	$10 copay	Up to $55
Other Lens Type	80% of charge	N/A
Lens Options		
Standard Polycarbonate	$40 copay	N/A
Standard Plastic Scratch Coating	$15 copay	N/A
Tint (Solid and Gradient)	$15 copay	N/A
UV Treatment	$15 copay	N/A
Standard Anti-reflective (a/r) Coating	$45 copay	N/A
Photochromatic/Transitions	$75 copay	N/A
Other Lens Options	80% of charge	N/A
Premium Anti-reflective (a/r) Coating		N/A
- Tier 1	$57 copay	N/A
- Tier 2	$68 copay	N/A
- Tier 3	80% of retail price	N/A
Contact Lenses		
Conventional	85% of balance over $130	Up to $104
Disposable	Balance over $130	Up to $104
Medically Necessary	$0	Up to $200
Contact Lens Fit & Follow-up Exam		
Standard	Up to $40 copay	N/A
Premium	10% discount off retail price	N/A
Non-Scheduled Items		
Doctor Misc. Materials	80% of charge	N/A
LASIK or PRK Vision Correction	85% of retail price or 95% of promotional price	N/A

Monthly Per-Person Rate
$16.84

To be eligible for this coverage, you must be an Iowa Farm Bureau member and you must be enrolled in the PPO™ Plus Premier-Preferred Prime dental plan.

Information on rates: Rates are effective January 1, 2027 through December 31, 2027. After paying to insure three children up to the age of 21, Delta Dental will not charge for additional children (up to the age of 21) included on the policy.

Veratrus Benefit Solutions, Inc. underwrites DeltaVision using the EyeMed Vision Care Insight Network. Veratrus is a wholly owned subsidiary of Delta Dental of Iowa. For more information on Veratrus, visit deltadentalia.com/veratrus. The information on this page summarizes your benefits and payment obligations. For complete details of the coverage, including exclusions, limitations, and out-of-network coverage, call 888-337-5159 or go to deltadentalia.com/fb.

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