

# SERVICE EMPLOYEES BENEFIT FUND (SEBF)

## OPTICAL BENEFIT

### OPTICAL COVERAGE

Service Employees Benefit Fund (SEBF) optical benefit covers up to **\$60 per year OR \$120 every two years, per person, towards routine eye care.**

This benefit may be used towards expenses for routine eye exam, frames, lenses or contact lenses.

Medical treatment of eye disease or injury is not covered under this benefit.

### HOW TO USE YOUR BENEFIT

- ❖ Choose any eye doctor, then submit your itemized bill to:

Service Employees Benefit Fund  
P. O. Box 1240  
Syracuse, NY 13201

Your claim will be processed and you will be reimbursed appropriately, **OR**

- ❖ Apply your benefit at any Value Vision location. Value Vision will file your claim and payment is made directly to them for services rendered. Locations are listed on the back of this flyer.

### WHO'S COVERED?

Individual + One Dependent or Family options may include legal spouse, same sex or opposite sex domestic partner\* (must meet certain requirements) and legal dependents through December 31 of the year they turn age 19 or through December 31 of the year they turn age 24 if they are continuous, full-time students.

\*Please confirm your eligibility for enrollment of a domestic partner with your employer.

### QUESTIONS

Please contact Lisa in the SEBF Buffalo area office at (716) 204-0806.