



## **VISION BENEFIT**

HHANE is pleased to offer a Vision Benefit to our Members

If you are planning on a visit to an Eye Care Specialist, HHANE will reimburse your out-of-pocket cost up to \$75.00 for an eye exam or up to \$100.00 for a contact lens eye exam.

Additionally, HHANE will reimburse your out-of-pocket cost up to \$150.00 for glasses or up to \$200.00 for contact lenses.

Legible vision **office invoice or statement must show receipt of out-of-pocket payment** to determine the reimbursement benefit amount. This benefit is valid for all visits in 2024.

RECEIPT MUST BE SUBMITTED OR POSTMARKED BY  
DECEMBER 31, 2024, TO BE CONSIDERED FOR  
REIMBURSEMENT

Paperwork can be given to any Director or mailed to:

HHANE  
PO Box 1811  
Plainville, MA 02762

If you have any questions, please call the HHANE office at  
1-508-316-3364