



Master Plan Vision

The *Premier* Choice in Dental & Vision Benefits

Example of Services	AVERAGE COST*	Your Cost			YOUR SAVINGS
		Option 1	Option 2	Option 3	
Complete Eye Exam	\$50	\$0 Copay	\$10 Copay	\$20 Copay	\$30-\$50
Contact lens Exam	\$50	15% off	15% off	15% off	\$7.50
Frames	\$150	15% off	15% off	15% off	\$22.50
Single Lenses	\$50	15% off	15% off	15% off	\$7.50
Progressive Lenses	\$100	15% off	15% off	15% off	\$15
Polycarbonate Lenses	\$50	15% off	15% off	15% off	\$7.50
Polarized Lenses	\$100	15% off	15% off	15% off	\$15
Disposable Contact Lenses	\$100	15% off	15% off	15% off	\$15
Conventional Contact Lenses	\$100	15% off	15% off	15% off	\$15

*Average cost is based on the national average of the 80th percentile of usual and customary rates as detailed in the National Vision Advisory Service for 2014

Enroll Now!
Call 844-641-5156 or
Mail Application Today!

Argus Dental & Vision, Inc.
ENROLLMENTS
4010 West State Street | Tampa, Florida 33609

INDIVIDUAL RATES	YOUR COST		
	Option 1	Option 2	Option 3
Individual	\$3.95 mth \$47.40 yr	\$3.35 mth \$40.20 yr	\$2.74 mth \$32.88 yr
Individual +1	\$7.90 mth \$94.80 yr	\$6.69 mth \$80.28 Yr	\$5.49 mth \$65.88 yr
Family	\$13.43 mth \$161.16 yr	\$11.38 mth \$136.56 yr	\$9.33 mth \$111.96 yr

- ◆ Network of Quality Providers with access to over 1,000 choices*
- ◆ \$0-\$20 copay for exam every 12 months
- ◆ Lasik Services through Quallsight
www.quallsight.com/argusdentalvision
- ◆ Discounts on Sun Wear
- ◆ NO Claim Form
- ◆ NO Calendar Year Maximum
- ◆ NO Pre-Existing Condition Exclusion
- ◆ NO Waiting Periods

**Must use in-network Providers*

ARGUS DENTAL & VISION, INC.

Toll Free 844-641-5156 | 4010 West State Street | Tampa, Florida 33609 | www.argusdentalvision.com