

Vision Benefits

Long Beach C.S.E.A. members are covered under the Platinum 12 Vision Plan through the CSEA Employee Benefit Fund.. To maximize your benefit under this plan you should see a CSEA EBF Participating Provider. We have an Occupational Rider added to our plan. Member ONLY can receive a second pair of glasses each year. You can only receive this second pair of glasses when you use a participating C.S.E.A. EBF Provider. To maximize your benefits you should use a participating plan provider. To obtain a copy of the Plan brochure and a Provider Booklet please contact John Mooney, or see providers listed below.

Benefit Provisions: Eligible members (and dependents, if covered) are entitled to an eye examination and one pair of glasses (lenses and frames), including standard and premier progressive no-line bifocals or trifocals, glass photo chronic lenses and scratch resistant coating OR soft daily wear lenses. You are entitled to receive an optical benefit once in a 12 month period.

BALDWIN (11510): Weinstein Optical Group 2429 Grand Ave. (516) 223-0528

FREEMONT (11520): Eye World Limited Elks Plaza 185 W. Merrick Rd. (516) 867-1213

LONG BEACH (11561) Dr Harry Briffel 612 E. Park Ave. (516) 431-3858

OCEANSIDE (11572) Plaza Optical Dr. Richard Bohn (516) 678-1616

MERRICK (11566) Access Optical Dr. Richard Bohn* (516) 223-1618

ROCKVILLE CENTRE (11570) Davis Vision Rockville Centre Plaza (516) 536-1031

Reimbursement: If you did not use one of the participating providers listed above or in the book and you need to submit a claim. Call 1-800-323-2732 when recording starts press #1 three times and you will be directed to the Vision Department of the CSEA EBF. Leave Employee Name, Name of person who received benefits, employee social security number and home address. You will receive a claim form within ten days. Attach bill and mail back to the Fund and you will receive benefits according to the following reimbursement scale:

Exam \$16.00, Frame: \$11, Standard Lenses \$14, Bifocals \$32, Trifocals \$32, Photo chronic \$12, Contact Lenses \$125.

As you can see the reimbursement rates are low that is why it is important to use a participating provider to maximize your benefit.

If you used a non-participating vendor you must call the C.S.E.A. EBF at 800-323-2732 to request a reimbursement form. Please be advised that using a non-participating provider greatly reduces your benefit, and there will be no reimbursement for (2nd pair of glasses for the member.)

*Dr. Bohn, Optometrist, is also an Empire Plan provider.

Hearing Aid Benefits

The C.S.E.A. Employee Benefit Fund reimburses up to \$450 per ear every three calendar years towards the cost of a hearing aid, including charges for is fitting upon the recommendation of a physician. Reimbursement is processed up to the maximum benefit allowed per eligible patient. Submit your completed claim form with original receipts and a copy of your doctor's prescription. Hearing aid repairs, batteries, and other non-durable equipment are not covered.