

Alliance Alert

The Public Employee Benefits Alliance (PEBA) was created by a group of Texas Government leaders working together for over a year to develop strategies to manage the rising costs of healthcare benefits. PEBA was established in January 2006 and was created pursuant to Chapter 791 of the Texas government Code, the Purchasing Program Chapter 271 of the Texas Local government Code and all other applicable provisions of Texas Law. PEBA membership is open to all Texas local governments who pay an annual membership fee and execute a PEBA Participating Interlocal Agreement. However, local governments who are members of one of the political subdivision Pools will receive automatic annual PEBA membership through the participating Pool. An additional per proposal fee will be established for proposal participation for all non-Pool members.

PEBA's mission is to support the individual members by providing: negotiation services to manage the spiraling cost of healthcare and related benefits, working together through the alliance procurement model to purchase healthcare and related benefits a competitive price, and provide contractual negotiations which will include vendor service accountability requirements. In order to accomplish this mission, PEBA makes a commitment to negotiate on behalf of the membership affordable, high-quality healthcare and related benefits and services.

The Public Employee Benefits Alliance (PEBA) Board met on June 5, 2007 to review the proposals that were received for the Vision proposal. The Board made the decision to execute a PEBA Alliance agreement with Spectera effective 10/01/07. The Spectera Alliance agreement will be available to all active PEBA member groups who are current with their annual membership and proposal fees or are members of one of the Pools. Below is an overview of the plan designs and pricing PEBA is offering through our Alliance with Spectera. **If you are interested in accessing this contract or want to obtain more details on this opportunity, contact PEBA at (512) 719-6768.**

To assist the PEBA membership in providing the benefits that the employer and employee can afford, the Employer would make a decision if they want to offer a Voluntary, Mandatory Employee/Voluntary Dependent or a 100% Mandatory Employee Vision Benefit. Once that decision is made, the employer would decide what plan option they are offering under the Voluntary, Mandatory Employee/Voluntary Dependent or 100% Mandatory selection. Spectera provided the PEBA membership with a comprehensive vision provider network, enhanced benefit options and plan design options in conjunction with competitive pricing. Note: The benefits below highlight the In-network benefit only. Where covered-in-full is listed, the benefit is available after the applicable copay.

Services	Spectera Option 1	Spectera Option 2	Spectera Option 3	Spectera Option 4	Spectera Option 5	Spectera Option 6
Mandatory			Employee mandatory	Employee mandatory	Mandatory	Mandatory
Voluntary	Voluntary	Voluntary	Dep Voluntary	Dep Voluntary		
BENEFIT						
Copay						
Examination	\$10	\$10	\$10	\$10	\$10	\$10
Materials (Lenses &/or Frames)	\$25	\$25	\$25	\$25	\$25	\$25
Benefit Frequency/ Coverage						
Examination						
Single Vision Lens	12 mos-Covered in full	12 mos-Covered in full	12 mos-Covered in full	12 mos-Covered in full	12 mos-Covered in full	12 mos-Covered in full
Lined Bifocal Lens	12 mos-Covered in full	12 mos-Covered in full	12 mos-Covered in full	12 mos-Covered in full	12 mos-Covered in full	12 mos-Covered in full
Lined Trifocal Lens	12 mos-Covered in full	12 mos-Covered in full	12 mos-Covered in full	12 mos-Covered in full	12 mos-Covered in full	12 mos-Covered in full

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Lenticular	12 mos-Covered in full	12 mos-Covered in full	12 mos-Covered in full	12 mos-Covered in full	12 mos-Covered in full	12 mos-Covered in full
Basic (standard) Progressive	20-40% disc	Covered in full w/materials copay	20-40% disc	Covered in full w/materials copay	20-40% disc	Covered in full w/materials copay
Frame Allowance at Retail Chains	24 mos-\$130/ if over \$130, less at least 20% discount on difference at most retail chains	24 mos-\$130/ if over \$130, less at least 20% discount on difference at most retail chains	24 mos-\$130/ if over \$130, less at least 20% discount on difference at most retail chains	24 mos-\$130/ if over \$130, less at least 20% discount on difference at most retail chains	24 mos-\$130/ if over \$130, less at least 20% discount on difference at most retail chains	24 mos-\$130/ if over \$130, less at least 20% discount on difference at most retail chains
Whole sale frame allowance at private practice offices	24 mos-\$50/ if elect frame over the allowance pay actual difference	24 mos-\$50/ if elect frame over the allowance pay actual difference	24 mos-\$50/ if elect frame over the allowance pay actual difference	24 mos-\$50/ if elect frame over the allowance pay actual difference	24 mos-\$50/ if elect frame over the allowance pay actual difference	24 mos-\$50/ if elect frame over the allowance pay actual difference
Contact Lenses (Per Pair): Medically Necessary in lieu of lenses and frames	Covered-in-full w/materials copay	Covered-in-full w/materials copay	Covered-in-full w/materials copay	Covered-in-full w/materials copay	Covered-in-full w/materials copay	Covered-in-full w/materials copay
Conventional Contact Lens	\$150 allowance coupled w/fitting-eval, purchase of contacts	\$150 allowance coupled w/fitting-eval, purchase of contacts	\$150 allowance coupled w/fitting-eval, purchase of contacts	\$150 allowance coupled w/fitting-eval, purchase of contacts	\$150 allowance coupled w/fitting-eval, purchase of contacts	\$150 allowance coupled w/fitting-eval, purchase of contacts
Low Vision	n/a	n/a	n/a	n/a	n/a	n/a
Prescription Change Benefit (Available if prescription changes 0.5 diopters or more, limited to lenses and contact lenses only)	n/a	n/a	n/a	n/a	n/a	n/a
Examination by Ophthalmologist	Covered in full after exam copay	Covered in full after exam copay	Covered in full after exam copay	Covered in full after exam copay	Covered in full after exam copay	Covered in full after exam copay
Examination by Optometrist	Covered in full after exam copay	Covered in full after exam copay	Covered in full after exam copay	Covered in full after exam copay	Covered in full after exam copay	Covered in full after exam copay
Standard Fit (Disposable) Contact lens Fitting	Fitting, up to 6 boxes and 2 follow ups w/material copay	Fitting, up to 6 boxes and 2 follow ups w/material copay	Fitting, up to 6 boxes and 2 follow ups w/material copay	Fitting, up to 6 boxes and 2 follow ups w/material copay	Fitting, up to 6 boxes and 2 follow ups w/material copay	Fitting, up to 6 boxes and 2 follow ups w/material copay
Specialty Contact lens Fitting	\$150 allowance coupled w/fitting-eval, purchase of contacts	\$150 allowance coupled w/fitting-eval, purchase of contacts	\$150 allowance coupled w/fitting-eval, purchase of contacts	\$150 allowance coupled w/fitting-eval, purchase of contacts	\$150 allowance coupled w/fitting-eval, purchase of contacts	\$150 allowance coupled w/fitting-eval, purchase of contacts
Other Add-Ons and Services	n/a	n/a	n/a	n/a	n/a	n/a

Out of Pocket Max for Lens Add-Ons - Single Vision lenses						
Scratch Coat (Factory)	Covered in Full	Covered in Full	Covered in Full	Covered in Full	Covered in Full	Covered in Full
UV Coating	20-40% disc	Covered in Full w/materials copay	20-40% disc	Covered in Full w/materials copay	20-40% disc	Covered in Full w/materials copay
Standard Anti-Reflective Coat	20-40% disc	20-40% disc	20-40% disc	20-40% disc	20-40% disc	20-40% disc
High Index 1.6	20-40% disc	20-40% disc	20-40% disc	20-40% disc	20-40% disc	20-40% disc
Plastic Tints Solid or Gradient	20-40% disc	Covered-in-full w/materials copay	20-40% disc	Covered-in-full w/materials copay	20-40% disc	Covered-in-full w/materials copay
Standard Transitions & other	20-40% disc	20-40% disc	20-40% disc	20-40% disc	20-40% disc	20-40% disc
Polycarbonate	Covered in Full w/materials copay	Covered in Full w/materials copay	Covered in Full w/materials copay	Covered in Full w/materials copay	Covered in Full w/materials copay	Covered in Full w/materials copay

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Glass Coloring	n/a	n/a	n/a	n/a	n/a	n/a
SV Polycarbonate upgrade	n/a	n/a	n/a	n/a	n/a	n/a

Accidental Loss of Sight						
One Eye	n/a	n/a	n/a	n/a	n/a	n/a
Both Eyes	n/a	n/a	n/a	n/a	n/a	n/a

Network						
Indemnity	n	n	n	n	n	n
Network	y	y	y	y	y	y
Non-Network	y	y	y	y	y	y

Rates			Tier Employer Cost	Tier Employer Cost		
Employee Only	\$5.90	\$6.90	\$4.90	\$5.60	\$4.90	\$5.60
EE+1	n/a	n/a	n/a	n/a	n/a	n/a
Family	n/a	n/a	n/a	n/a	n/a	n/a
Employee + Spouse	\$11.40	\$12.90	\$4.90	\$5.60	\$8.40	\$9.40
Employee + Child(ren)	\$11.60	\$13.10	\$4.90	\$5.60	\$8.80	\$9.80
Employee + Family	\$17.90	\$20.20	\$4.90	\$5.60	\$12.10	\$13.50

			Tier Employee Cost	Tier Employee Cost		
Employee Only	n/a	n/a	\$0.00	\$0.00	n/a	n/a
Employee + Spouse	n/a	n/a	\$5.70	\$6.30	n/a	n/a
Employee + Child(ren)	n/a	n/a	\$6.10	\$6.90	n/a	n/a
Employee + Family	n/a	n/a	\$12.50	\$13.90	n/a	n/a

			Tier Total Cost	Tier Total Cost		
Employee Only	n/a	n/a	\$4.90	\$5.60	n/a	n/a
Employee + Spouse	n/a	n/a	\$10.60	\$11.90	n/a	n/a
Employee + Child(ren)	n/a	n/a	\$11.00	\$12.50	n/a	n/a
Employee + Family	n/a	n/a	\$17.40	\$19.50	n/a	n/a

The Major Vision Chains that are included in the Spectera Network are identified below:

Spectera		
Abba Eyecare	First Sight Vision Services	Standard Optical
Allegany Optical	For Eyes	Stein Optical
Alvernon Optical	General Vision Services	Sterling & Cohen's Optical
American Vision	H. Rubin Vision	SVSVision
America's Best Contacts & Eyeglasses	Halpern & Associates	Texas State Optical
Bard Optical	Heartland Vision	The Eye Center Group
Binyon's	Henry Ford Optimeyes	The Optical Shoppe
Bizer's	Herslof Opticians	The Vision Center in Wal-Mart
Cambridge Eye	Horizon Eye Care	Thoma Sutton Optical
C&B Optical One	Hour Eyes	Uhlemann Optical
COSTCO	Kent Optical	United Optical
Co/Op Optical	Longe Optical	Vision Care Plus
Crown Optical	Louisville Optometric Centers	Vision Center II
Cunningham Optical	Midwest Eye Consultants	Vision City
Davis, Duehr, Dean	Midwest Vision Centers	
	Monfried Optical	

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Spectera		
D.O.C. Optics	My Eye Dr.	Vision Mart
Doctors on Sight	National Optometry	Vision Point
Doctor's Value Vision	Nationwide Vision	Vision Works
Doctor's Vision Works	O.H. Gerry Optical	Vision World
Dr. Barnes Eyemart	One Hour Optical	Wal-Mart Vision Centers
Express	Optical Fashions	Whylie Eyecare Centers
Dr. Tavel Optical	Optiview	Wisconsin Vision
Duling Optical	Optivision	Wise Eyes Optical
Exact Eyecare	Optometric Assoc. FL	
Eye Boutique	@ Inno Vision	
Eye Care Associates	Ossip Optometry	
Eye Care One	Real Optics, Vogue Vision,	
Eye Care Plus	Yonkers Vision Center	
Eye Doctors Optical	Riverfront Optical	
Outlets	Rose Optical	
Eye Drx	Rosin Eyecare	
Eye Mart	RX Optical	
Eye Surgeons Associates	Schaff Vision Care	
Eye Trends	Shawnee Optical	
Eyes First Vision Centers	Shopko	
Eyecare center, ODP	Singer Specs	
Eyeglass World	Site for Sore Eyes	
Eyemasters	Smeelink Optical	

In addition, the PEBA Vision proposal participants network was assessed and 96% network coverage was provided.

Employer	EE census	% of EE w/desired access of 1 provider within 15 miles Spectera	Average mileage distance for choice of 5 providers Spectera
Amarillo	1,575	100%	4.3
Brazos River Authority	229	74.60%	12.2
Bryan	799	86.40%	5
Carrollton	800	97.60%	3.9
Coppell	323	94.00%	6.5
Farmers Branch	401	95.00%	4.2
Iowa Park	42	96.1	10.6
Lewisville	665	97.90%	5
McKinney	639	87.40%	7.1
Mesquite	1,006	95.60%	6.1
Midland	735	97.20%	10.3
Pasadena	951	99.20%	3.5
Pearland	413	99.50%	3.5
Port Lavaca	82	18.90%	8.6
Rowlett	362	94%	6.5
San Marcos	459	100%	14.2
Town of Highland Park	117	95.9	5.2
Travis County Healthcare District	7	100%	1.6