

## **RESOLUTION NO. 20231128-05**

## **VISION BENEFITS RENEWAL WITH SUPERIOR VISION**

WHEREAS, TexAmericas Center is a political subdivision of the State of Texas with the powers and authorities specified in Chapter 3503 of the Special District Local Laws Code of the State of Texas; and

WHEREAS, TexAmericas Center has a health insurance policy for TexAmericas Center employees; and

WHEREAS, TexAmericas Center adopted a Personnel Policy Manual by Resolution #20140923-20 on September 23, 2014 with a revision date of May 23, 2023 by Resolution #20230523-04; and

WHEREAS, TexAmericas Center has sought, though a competitive process, bids to provide employee vision benefits; and

WHEREAS, SUPERIOR VISION has submitted a satisfactory proposal and can provide employee vision benefits starting January 1, 2024.

**NOW, THEREFORE, BE IT RESOLVED** by the Board of Directors that the Board of TexAmericas Center approves the vision benefits and the Executive Director/CEO shall be and is hereby authorized to execute any necessary documents.

PASSED AND APPROVED THIS 28th day of November 2023.

Jim Roberts, Chairman of the Board

ATTEST:

Justin Powell, Secretary

Attached: Renewal

	Current / Renewal	Option 1
Carrier	Superior Vision	Principal
орау:	In-Network	In-Network
Vision Exam Copay Materials Copay	\$10 \$25	\$10 \$25
Contact - Standard Fit & Follow Up	N/A	Up to \$60
Materials:		
Frames	Up to \$150 20% off remaining balance	Up to \$130 20% off remaining balance
Single Vision, Lined Bifocal, Lined Trifocal	100%	100%
Lenticular	100%	100%
Progressive	Discount	Discount
Contact Lenses	Up to \$150 10% off remaining balance	Up to \$130
Contact Lenses Medically Necessary	100%	100%
equency Allowance:		
Exams & Lenses	12 Months	12 Months
Frames	12 Months	24 Months
her:	AGRICATION OF THE STATE OF THE	
Lasik Allowance	Discount	Discount
Network	Southwest	VSP
Network Website	superiorvision.com	principal.com
rticipation:	THE RESIDENCE OF THE PERSON NAMED IN	
Rate Guarantee	January 1, 2025	January 1, 2026
Current Participation	20 Enrolled	20 Enrolled
Participation Required	2 Enrolled	5 Enrolled
onthly Rates:	Current / Renewal	
Employee Only	\$5.20	\$5.18
Employee + Spouse	\$9.00	\$8.97
Employee + Children	\$9.52	\$9.48
Employee + Family	\$14.25	\$14.20

