

VISION PLAN

EYEMED VISION

EyeMed's Vision plan is a PPO plan that offers both in-network and out-of-network benefits. With EyeMed's Vision plan, you have access to independent providers as well as convenient retail stores like LensCrafters®, Target Optical®, and most PearleVision® locations. You also can order glasses and contacts online through Glasses.com (glasses.com), ContactsDirect (ContactsDirect.com).

When you use one of the providers in EyeMed's extensive network, you receive a higher level of coverage and you are only required to pay a copayment at the time of service. With an out-of-network provider, you must pay the bill in full and file a claim for reimbursement of covered benefits up to the allowance reimbursement schedule.

WHAT'S AN ALLOWANCE?

An allowance is a set amount of money the plan covers toward the purchase of eyeglass frames or other items. Here's a simple-to-follow example. If your plan includes a frame allowance for \$120 and you select frames that cost \$150, you'll owe \$30 for frames at the time of purchase. As an EyeMed member, you may also receive an additional 20% off the remaining balance at participating providers – so your final cost for the frame could be as low as \$24.

WHAT ARE THE DIFFERENT "MATERIALS"?

Vision materials refer to frames, lenses or contact lenses offered at a provider location. Materials may come with certain limitations and exclusions regulated by your policy or by the materials manufacturer.

WHAT'S A PLAN FREQUENCY AND HOW DOES IT WORK?

The vision plan has specified frequency for each covered benefit period. If your plan frequency reads "Once every 12 months" on your benefit summary, then benefits will refresh 12 months after the last date of service. For example: if a member used their benefit on March 17, 2023 then benefits will refresh on that day the following year, March 17, 2024. If your plan frequency reads "Once every 24 months" on your benefit summary, then benefits will refresh 24 months after the last date of service. For example: If a member used their benefit on March 17, 2023 then benefits will refresh on that day 24 months later, March 17, 2025.

WHAT IS A PLUS PROVIDER?





Introducing Eye360...

Eye3601 provides enhanced benefits when members visit a PLUS Provider—a select group of providers in the EyeMed network. Eye360 focuses on health, simplicity and savings. Best of all, the perks are built into the vision plan. That means no promo codes or paperwork required.

Seeing Savings

With Eye360, members receive \$0 copay eye exams and an additional \$50 frame allowance at PLUS Providers—on top of the base plan's benefits. And when combined with other offers and discounts, it adds up to truly eye-opening savings.

Vision Care Is Healthcare

An annual eye exam not only helps uncover vision correction needs, it can sometimes be the first to detect signs of serious health conditions, such as diabetes, high blood pressure, high cholesterol and eye diseases like glaucoma and cataracts. With Eye360, \$0 annual eye exams help encourage employees to be proactive with their holistic healthcare.



Find nearby PLUS Providers on our Provider Locator Just look for the PLUS

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	WHAT YOU PAY	
VISION PLAN BENEFITS	IN NETWORK	OUT OF NETWORK
EXAMS (every 12 months)		
Vision Exam	\$10 Exam Co-pay \$0 Plus Providers	Up to \$40 Reimbursement
LENSES (EVERY 12 MONTHS)		
Single Bifocal Trifocal	\$25 Material Co-pay	Reimbursement up to: \$30 \$50 \$70
FRAMES (every 24 months)		
	\$120 allowance/\$170 allowance (Plus Providers), then 20% off amount over frame allowance	Up to \$84 Reimbursement
CONTACTS ¹ (IN LIEU OF GLASSES) (every 12 m	nonths)	
Medically Necessary ²	Covered in Full	Up to \$300 Reimbursement
	\$120 allowance ³ , then 15% off remaining balance	Up to \$84 Reimbursement
EMPLOYEE SEMI-MONTHLY CONTRIBUTIONS Employee Employee + Spouse Employee + Child(ren) Employee + Family	EYEMED VISION \$0.00 \$2.38 \$0.61 \$4.18	



If you utilize Out of Network services, you may be required to make a full payment and submit a claim form for reimbursement.

'Contact lens allowance can only be applied toward the first purchase of contacts made during a benefit period. Any unused amount remaining cannot be used for subsequent purchases made during the same benefit period, nor can any unused amount be carried over to the following benefit period.

*Non-elective contact lenses are provided for reasons that are not cosmetic in nature and have a maximum benefit per benefit period. Non-elective contact lenses are covered when the following conditions have been identified or diagnosed:

Extreme Visual Acuity or other functional problems that cannot be corrected by spectacle lenses; or

Keratoconus: Unusual cone-shaped thinning of the comea of the eye which usually occurs before the age of 20 years; or

High Ametropia: Unusually high levels of near sightedness, far sightedness, or

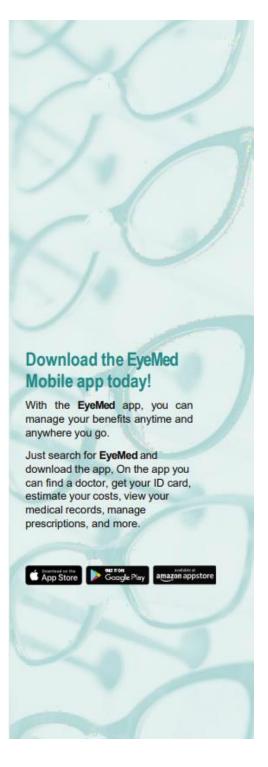
Anisometropia: When one eye requires a much different prescription than the other eye.

Elective Conventional Lenses get additional 15% discount off any remaining balance. There is no additional discount on Elective Disposable Lenses.



EYEMED VISION PROVIDER SEARCH

- Go to <u>www.eyemed.com</u>
- Click "Find an eye doctor" at the top, right corner of the screen.
- Under "Network" select "Access" from the drop-down menu
- You may search by location, or search for a specific doctor by name. You may also search for online providers or Lasik specialists.
- A list of localized providers will be generated for you to choose from.



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