

DVISVISION® SEE LIFE Vision Care Plan Benefit Description

Sponsored by, and administered on behalf of the members of

Building Service 32B.I Health Fund

English Version

Please call 32BJ Member Services at 1-800-551-3225 (Monday through Friday, 8 AM to 6 PM, EST) with questions.

Building Service 32BJ Health Fund is pleased to provide this information about your vision care plan administered by Davis Vision, Inc., a leading national administrator of vision care programs. Eligibility for vision care benefits is determined by the same rules that apply to your health care benefits.

How do I receive services from a provider in the network?

- Present your Empire Blue Card when you visit the Davis Vision provider or call the Davis Vision network provider of your choice and schedule an appointment.
- Identify yourself as a Building Service 32B| Health Fund member and Empire Blue Card holder.
- Provide the office with the participant's ID Number and the name and date of birth of any dependent child requiring services.

It's that easy! The provider's office will verify your eligibility for services, and claim forms are not required!

Who are the network providers?

They are licensed providers who are extensively reviewed and credentialed to ensure that stringent standards for quality service are maintained. Please refer to your DavisVision network provider list or call 32BJ Member Services at I-800-551-3225 (Monday through Friday, 8 AM to 6 PM, EST) to obtain the names and addresses of the network providers nearest you.

What are the plan benefits, frequencies and costs?

EYE EXAMINATIONS including dilation as professionally indicated. Every 24 months,
In-Network Copayment\$0
In-Network Copayment
EYEGLASSES
In-Network Copayment\$0
You may choose any Fashion or Designer level frame from Davis Vision's Frame Collection, covered in full. Or, if you select another frame in the network provider's office, a \$40 wholesale credit will be applied. This credit would also apply at retail locations that do not carry the Frame Collection. Members are responsible for the amount over \$40. For more information on lenses, please see "What lenses/coatings are included?".
Out-of-Network
CONTACT LENSES
Members may use their \$120 credit to go toward the provider's own supply of contact lenses, evaluation, fitting and follow-up care. This credit would also apply towards all contact lenses received at participating retail locations.
Out-of-Network

Please note: Contact lenses can be worn by most people. Once the contact lens option is selected and the lenses are fitted, they may not be exchanged for eyeglasses.

What lenses/coatings are included?

- Plastic or glass single vision, bifocal or trifocal lenses, in any prescription range.
- · Glass grey #3 prescription lenses.
- · Oversize lenses.
- · Post-cataract lenses.
- Tinting of plastic lenses.
- · Polycarbonate lenses.
- Glass photochromic lenses.
- · Scratch-resistant coating.
- · Intermediate vision lenses.
- · Ultraviolet (UV) coating.
- Standard progressive addition multifocal lenses.*

Are there any optional frames, lens types or coatings available?

Yes, you can pay the low, discounted fixed fees indicated (in addition to your basic copayment) and receive these exciting optional items:

- \$20 for a Premier frame from the "Collection".
- \$35 for standard ARC (anti-reflective coating). Premium ARC is \$48. Ultra ARC is \$60.
- \$75 for polarized lenses.
- \$65 for plastic photosensitive lenses.
- \$55 for high-index (thinner and lighter) lenses.
- \$40 for premium progressive addition multifocal lenses.*
 - * Progressive addition multifocals can be worn by most people. Conventional bifocals will be supplied at no additional cost for anyone who is unable to adapt to progressive addition lenses; however, the copayment will not be refunded.

When will I receive my eyewear?

Generally, your eyewear will be delivered to your provider from the laboratory within five business days. More delivery time may be needed when out-of-stock frames, anti-reflective coating, specialized prescriptions or a participating provider's frame is selected.

What about out-of-network provider benefits?

You may receive services from an out-of-network provider, although you will receive the greatest value and maximize your benefit dollars if you select a provider who participates in the network. If you choose an out-of-network provider, you must pay the provider directly for all charges and then submit a claim for reimbursement to:

Vision Care Processing Unit P.O. Box 1525 Latham, NY 12110

Only one claim per service may be submitted for reimbursement each benefit cycle. To request claim forms, please visit the Davis Vision Web site at **www.davisvision.com** or call 1-800-551-3225.

May I use the benefit at different times?

You may "split" your benefits by receiving your eye examination and eyeglasses (or contact lenses) on different dates or through different provider locations, if desired. However, complete eyeglasses must be obtained at one time, from one provider. Continuity of care will best be maintained when all available services are obtained at one time from either a network or an out-of-network provider. To maximize your benefit value we recommend that all services be obtained from a network provider.

Warranty Information:

One-year eyeglass breakage warranty included at no additional cost.

All plan eyeglasses come with a breakage warranty for repair or replacement of the frame and/or lenses for a period of one year from the date of delivery. The warranty applies to all plan covered eyeglasses, i.e. spectacle lenses, Davis Vision Collection frames and national retailer frames (where our exclusive Collection is not displayed).

Are there any exclusions?

The following items are not covered by this vision program:

- · Medical treatment of eye disease or injury.
- Vision therapy.
- Special lens designs or coatings, other than those previously described.
- · Replacement of lost eyewear.
- Non-prescription (plano) lenses.
- · Contact lenses and eyeglasses in the same benefit cycle.
- · Services not performed by licensed personnel.
- Two pairs of eyeglasses in lieu of a bifocal.

For more information, please visit the 32BJ website at www.seiu32bj.org. To access information about your Vision Care benefits, simply click on "Member Benefits", then "32BJ Health Fund" and select "Vision Care Program". You may also call 32BJ Member Services at 1-800-551-3225 to:

- Find a provider with "The Collection".
- · Verify your eligibility.
- Speak with a Member Service Representative.
- Ask any questions about your Davis Vision benefits.

Member Service Representatives are available: Monday through Friday, 8 AM to 6 PM, EST. Please feel free to access information online regarding participating providers at www.seiu32bj.org. You may also view the selection of frames in the "Collection" from this site in the comfort of your home.

Your rights as a patient:

Davis Vision recognizes that all patients have specific rights, including, but not limited to:

- The right to complete information about their healthcare options and consequences.
- The right to participate in all treatment decisions.
- The right to dignity, privacy, confidentiality and non-discrimination.
- The right to complain or appeal any decision.

Patients also have the responsibility:

- To provide complete and accurate information.
- To follow care instructions.

For a complete copy of Your Rights and Responsibilities As a Patient, please visit Davis Vision's website at: <u>www.davisvision.com</u> or call 1-800-551-3225.

"All insured products are underwritten by either HM Life Insurance Company or HM Life Insurance Company of New York."