



## Your Davis Vision Plan Benefits

Healthy eyes and clear vision are an important part of your overall health and quality of life. With the rising cost of eyewear you can't afford not to be covered through a managed vision care plan. Your vision plan helps you care for your eyes while saving you money by offering:

*Paid-in-full eye examinations, eyeglasses and contacts!*

*Frame Collection:* Your plan includes a selection of designer, name brand frames that are completely covered in full.<sup>3</sup>

*Contact Lens Collection:* Select from the most popular contact lenses on the market today with Davis Vision's Contact Lens Collection.<sup>3</sup>

*One-year eyeglass breakage warranty included on plan eyewear at no additional cost!*

### Value for our Members

A comprehensive benefit ensuring low out-of-pocket cost to members and their families. Our goal is 100% member satisfaction.

### Convenient Network Locations

A national network of credentialed preferred providers throughout the 50 states.

### How to locate a Network Provider...

Just log on to the Open Enrollment section of our Member site at [www.davisvision.com](http://www.davisvision.com) and enter client control code 2429 for the Standard Plan and client control code 2431 for the Premium Plan, and click "Find a Provider".

### Freedom of Choice

Access to care through either our network of independent, private practice doctors (optometrists and ophthalmologists) or select retail partners.

### Value-Added Features:

- Mail Order Contact Lenses Replacement contacts (after initial benefit) through [DavisVisionContacts.com](http://DavisVisionContacts.com) mail-order service ensures easy, convenient, purchasing online and quick, direct shipping to your door. Log on to our member Web site for details.
- Laser Vision Correction discounts of up to 25% off the provider's Usual & Customary fees, or 5% off advertised specials, whichever is lower.

## Lower costs and more benefits! Your savings add up with the Buy-Up Plans:

SERVICES	WITHOUT DAVIS VISION	WITH DAVIS VISION	
		Standard Vision Plan	Premium Vision Plan
Eye Examination	\$103	\$10	\$5
Lenses			
Bifocals	\$116	\$20	\$0
Scratch-Resistant Coating	\$25	\$0	\$0
Transitions <sup>®1</sup>	\$110	\$65	\$65
Frame	\$160	\$0	\$0
TOTAL COST	\$514	\$95	\$70
Annual Premium (Employee Only)		\$170.72	\$184.12
TOTAL SAVINGS		\$419	\$444

For more details about the plan, just log on to the Open Enrollment section of our member site at [davisvision.com](http://davisvision.com) or call **1.877.923.2847** and enter Client Code **2429** for Standard Vision Plan or **2431** for Premium Vision Plan.

You may only enroll in the vision plan during open enrollment.

Employee Rates	MONTHLY		ANNUALLY	
	Standard	Premium	Standard	Premium
Employee	\$6.31	\$9.51	\$75.72	\$114.12
Employee plus Spouse	\$11.36	\$17.12	\$136.32	\$205.44
Employee plus Child(ren)	\$11.99	\$18.93	\$143.88	\$227.16
Employee plus Family	\$18.93	\$28.66	\$227.16	\$343.92

<sup>1</sup> Transitions<sup>®</sup> is a registered trademark of Transitions Optical Inc.

Davis Vision has made every effort to correctly summarize your vision plan features herein. In the event of a conflict between this information and your organization's contract with Davis Vision, the terms of the contract or insurance policy will prevail.

# Plan Coverage & Cost Comparison

In-Network Benefits		Buy Up Plans	
		Standard Plan	Premium Plan
Frequency (once every)	Eye Examination	12 months	12 months
	Contact Lens Evaluation & Fitting	12 months	12 months
	Frame	12 months	12 months
	Spectacle Lenses	12 months	12 months
	Contact Lenses (in lieu of eyeglasses)	12 months	12 months
Copay	Eye Examination	\$10	\$5
	Spectacle Lenses	\$20	\$0
Frames	Any frame in the provider's office	\$130 or \$180 <sup>1</sup> allowance plus 20% off balance <sup>2</sup>	\$150 or \$200 <sup>1</sup> allowance plus 20% off balance <sup>2</sup>
	Davis Vision's Frame Collection <sup>3</sup> (in lieu of Allowance)		
	Fashion frame	\$0	\$0
	Designer frame	\$0	\$0
	Premier frame	\$25	\$25
Spectacle Lenses	Single Vision, Lined Bifocal or Trifocal	\$0	\$0
	Gradient Tint	\$0	\$0
	Solid Tint	\$0	\$0
	Scratch-Resistant Coating	\$0	\$0
	Polycarbonate Lenses	\$0 or \$30 <sup>4</sup>	\$0
	Ultraviolet Coating	\$12	\$0
	Intermediate-Vision Lenses	\$30	\$0
	Standard Anti-Reflective (AR) Coating	\$35	\$35
	Premium AR Coating	\$48	\$48
	Ultra AR Coating	\$60	\$60
	Standard Progressive Lenses	\$50	\$0
	Premium Progressives Lenses	\$90	\$40
	Ultra Progressives Lenses	\$140	\$90
	High-Index Lenses	\$55	\$55
	Polarized Lenses	\$75	\$75
Plastic Photosensitive Lenses	\$65	\$65	
Scratch Protection Plan (Single Vision   Multifocal)	\$20   \$40	\$20   \$40	
Contacts	Contact Lens Evaluation & Fitting		
	- Standard Lens Type	Included	Included
	- Specialty Lens Type	\$60 allowance with 15% off balance <sup>2</sup>	\$60 allowance with 15% off balance <sup>2</sup>
	Non-Collection Contact Lenses	\$130 allowance plus 15% off balance <sup>2</sup>	\$200 allowance plus 15% off balance <sup>2</sup>
	Davis Vision's Contact Lens Collection <sup>3</sup>	\$0 ( up to 4 boxes)	\$0 (up to 8 boxes)
	Visually Required (with prior approval)	\$0	\$0
Out-of-Network Reimbursement Schedule			
	Eye Examination	Up to \$30	Up to \$30
	Frames	Up to \$30	Up to \$30
	Spectacle Lenses (Single Vision   Bifocal/Progressive Lenses   Trifocal   Lenticular)	Up to \$25   \$35   \$45   \$60	Up to \$25   \$35   \$45   \$60
	Contact Lenses (Elective   Visually Required)	Up to \$75   Up to \$225	Up to \$75   Up to \$225

## How to locate a Network Provider...

Just log on to the Open Enrollment section of our Member site and click "Find a Provider" for a provider, including:



<sup>1</sup> Enhanced retail frame allowance available at all Visionworks (formerly Eye Care Centers of America) retail locations.

<sup>2</sup> At Walmart or Sam's Club locations, members will receive the full allowances toward Walmart's/Sam's Club everyday low prices. Additional discounts not applicable.

<sup>3</sup> Collection is available at most participating independent provider offices. Collection is subject to change. All contact lenses in Collection are single vision spherical lenses.

<sup>4</sup> Polycarbonate lenses are covered in full for dependent children, monocular patients and patients with prescriptions +/- 6.00 diopters or greater.