

## Welcome to Davis Vision!

We are pleased to provide you with information on your vision benefit to help you care for your vision and eye health - a key part of overall health and wellness!

If you are not currently enrolled, please visit our member site at davisvision.com or call 1.877.923.2847 and enter your unique client code 3642 to locate providers or for additional information.



**Using your benefits is easy!** Just log on to our Member site at davisvision.com and enter your unique *Client Code* **3642** and click "Find a Provider," or call us at 1.888.234.5164.

**Make an appointment.** Tell your provider you are a Davis Vision member with coverage through UAW Retiree Medical Benefits Trust. Provide your member ID number, name and date of birth, and do the same for your covered dependents seeking vision services. Your provider will take care of the rest!

#### 100% OF YOUR CALLS & CLAIMS ARE PROUDLY ADMINISTERED IN THE USA

# Your Davis Vision Plan Benefits

Benefit	Frequency Once every -			In-network Coverage	
Eye Examination <sup>/1</sup>	12 months/2		Covered in full. Include	es dilation when professionally indicated.	
Spectacle Lenses				focal, or standard progressive lenses. Available in all ranges of I sizes with tinting and scratch resistant coating	
Frame	12 months		Covered in Full Frames:	Any Fashion frame from Davis Vision's Collection <sup>/3</sup> (retail value, up to \$100).	
			OR, Frame Allowance:	\$40 toward any frame from provider. <sup>/4</sup>	
Contact Lens Evaluation, Fitting & Follow Up Care (in lieu of eyeglasses)	12 months	All Contacts:		\$40 allowance. <sup>/4</sup>	
Contact Lenses (in lieu of eyeglasses)	12 months		Contact Lens Allowance:	\$75 allowance toward any contacts from provider's supply. <sup>/4</sup>	
		OR,	Visually Required Contacts:	With prior approval covered up to \$350.	
VALUE ADDED OPTIONS			WITH DAVIS VISION	<ul> <li><sup>17</sup> The program benefits are limited to one vision testing examination in any period of January 1, plus one referral (whe medically necessary) to an ophthalmologist for re-examinate within 60 days from the date of initial examination with a \$4 allowance.</li> <li><sup>27</sup> Insulin dependent diabetics are entitled to a second viexamination every January 1 with prior approval.</li> <li><sup>37</sup> The Davis Vision Collection is available at most participatir independent provider locations.</li> <li><sup>47</sup> 20% discount off any remaining balance for frames and 15 discount for contact lenses and evaluation, fitting and follow care. Discount is not available at Costco locations.</li> <li><sup>57</sup> For dependent children, monocular patients and patients we prescriptions of +/- 6.00 diopters or greater.</li> <li><sup>67</sup> Transitions<sup>®</sup> is a registered trademark of Transitions Optical Please note: Your provider reserves the right to not disper materials until all applicable member costs, fees copayments have been collected. Contact lenses: Routine examinations do not include professional services for corr lens evaluations. Any applicable fees above the evaluation fitting allowance are the responsibility of the member. If corr lenses are selected and fitted, they may not be exchant for eyeglasses. May not be combined with other discount offers. Please be advised these lens options and copayment apply to in-network benefits.</li> </ul>	
FRAMES					
Designer Frame (from the Davis Vision Collection)			\$15		
Premier Frame (from the Davis Vision Collection)			\$40		
LENSES					
Polycarbonate Lenses			\$0 <sup>/5</sup> or \$35		
Premium Scratch Resistant Coating			\$30		
Digital Single Vision Lenses			\$30		
Ultraviolet Coating			\$15		
Standard Anti-Reflective (AR) Coating			\$40		
Premium AR Coating			\$55		
Ultra AR Coating			\$69		
Ultimate AR Coating Standard Progressive Addition Lenses			\$85		
Premium Progressive Addition Lenses			\$0 \$105		
Ultra Progressives Addition Lenses					
			\$140		
Ultimate Progressives Addition Lenses High-Index Lenses 1.67   1.74			\$175 \$60   \$120		
			\$60   \$120		
			\$50		
Blue Light Filtering			\$15		
Polarized Lenses			\$75		
Photochromic Lenses (i.e. Transitions®, etc.) <sup>/6</sup>			\$70		
Scratch Protection Plan (Single vision   Multifocal lenses)			\$20   \$40		

# **Frequently Asked Questions**

#### How can I contact Member Services?

Call 1.888.234.5164 for automated help 24/7. Live help is also available seven days a week: Monday-Friday, 8 a.m.-11 p.m. | Saturday, 9 a.m.-4 p.m. | Sunday, 12 p.m.-4 p.m. (Eastern Time). (TTY services: 1.800.523.2847.)

#### What frames are in Davis Vision's Collection?

Our Collection offers a great selection of fashionable and designer frames, most of which are <u>covered in full</u>. No wonder 7 out of 10 members select a Collection frame. Log on to our member Web site at davisvision.com and take a look!

#### When will I receive my eyewear?

Your eyewear will be delivered to your network provider generally within five business days of order receipt. Special prescriptions, lens coatings, provider frames or out-of-stock frames may delay the standard turnaround time.

#### Do I need a claim form?

Claim forms are only required if you visit an out-of-network provider. Claim forms are available on our member Web site.

#### Can I split my benefits?

You may split your benefits by receiving your eye examination and eyeglasses or contact lenses on different dates or through different provider locations. To maximize your benefit value we recommend that all services be obtained from a network provider.

#### Can I use an out-of-network provider?

Yes; however, you receive the greatest value by staying in-network. If you go out-of-network, pay the provider at the time of service, then submit a claim to Davis Vision for reimbursement, up to the following amounts: (*For Members who reside*  $\leq 25$  miles from a network provider) eye exam -  $0 \mid \text{single vision lenses} - 13 \mid \text{bifocal/}$  progressive -  $13 \mid \text{trifocal} - 13 \mid \text{lenticular} - 13 \mid \text{frame} - 13 \mid \text{elective contacts} - 37 \mid \text{visually required contacts} - 552.50. ($ *For Members who reside* $<math>\geq 25$  miles from a network provider) eye exam -  $45 \mid \text{single vision lenses} - 559 \mid \text{bifocal/progressive} - 579 \mid \text{trifocal} - 599 \mid \text{lenticular} - 599 \mid \text{frame} - 549 \mid \text{elective contacts} - 589 \mid \text{visually required contacts} - 5200.$ 

#### Are there any exclusions to the vision benefits?

Your vision plan does not cover medical treatment of eye disease or injury; vision therapy; special lens designs or coatings, other than those described herein; replacement of lost eyewear; nonprescription (plano) lenses; contact lenses and eyeglasses in the same benefit cycle; services not performed by licensed personnel; two pair of eyeglasses in lieu of bifocals.

## DAVIS VISION EXTRAS!

**Two Year Breakage Warranty** Repair or replacement of your plan covered spectacle lenses, Collection frame or frame from a network retail location where the Collection is not displayed.

**Additional Savings** Members will receive 50% off of additional complete pairs of eyeglasses and sunglasses at Visionworks and 30% off at other participating providers on the same transaction. Otherwise, a 20% discount off the provider's usual and customary rate is available. Contact lenses are available at a 10% discount.

**Mail Order Contact Lenses** Replacement contacts (after initial benefit) through www.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** Davis Vision provides you and your eligible dependents with the opportunity to receive discounted laser vision correction, often referred to as LASIK. For more information, visit www.davisvision.com.

**Eye Health & Wellness** Log on and learn more about your eyes, health and wellness; common eye conditions that can impair vision; and what you can do to ensure healthy eyes and a healthier life.

**For more details...** about your vision benefits, patient rights and responsibilities, or more information about Davis Vision, please log on to our member Web site or contact us at 1.888.234.5164.

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 will prevail.

Administered by Davis Vision, which may operate as Davis Vision Insurance Administrators in California.