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Vision care plan for **PARTNERS  
FOR HEALTH**



# 2021

# Vision Care Plan

State of Tennessee

from  **VersantHealth**

[davisvision.com/stateoftn](https://davisvision.com/stateoftn) • (800) 208-6404

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## Who we are

Davis Vision is more than just a national vision care administrator. We are an advisor, partner, and leader serving over 23 million members.

Davis Vision offers:

- A broad array of paid-in-full options\*
- Freedom of choice and flexible benefits:
  - Use your allowance on any frame in-network
  - Frame options with economical out-of-pocket cost (Visionworks and The Exclusive Collection)
  - Popular lens options with savings based upon plan design
- Extensive blended network of premier retailers nationally as well as independent optometrists and ophthalmologists, totaling over 100,000\*\* points of access
- NCQA-certified eye care professional credentialing process to ensure industry-leading standards for quality
- 100% United States-based services and operations
- One-year eyeglass breakage warranty on most plan materials with no additional cost based upon plan design

We ensure economical out-of-pocket costs with a broad array of paid-in-full options and freedom of choice in eyewear. Members may select any frames or contact lenses and their allowance will apply, or they can choose frames that are covered in full through the Davis Vision Exclusive Collection based upon plan design.

\* Actual costs and benefits may vary based upon plan design selected. Exclusions and limitations may apply.

\*\* As of October 2020.

# Your vision benefits

## How to use the plan

- Upon enrollment, Davis Vision® will mail to your home address:
  - two ID cards, which can be used for you and your covered family members;
  - a summary of the benefits covered under the plan; and
  - a listing of network eye care professionals located close to your home.
- The Davis Vision eye care professional network includes independent eye care professionals, as well as top national retailers including Visionworks, Costco, Sam's Club, Walmart, and JCPenney Optical. To search the full eye care professional directory, go to [davisvision.com/stateoftn](https://davisvision.com/stateoftn) or call (800) 208-6404.
- Once you have selected an eye care professional, you may call them directly and schedule an appointment.
- Please confirm that coverage for all services through the Davis Vision plan is an option with your eye doctor before services are performed.

## Frequency of vision benefits\*

Service	Frequency
Eye exam	Once every calendar year
Eyeglass lenses	Once every calendar year
Frames	Once every two (2) calendar years
Contact lenses	Once every calendar year (in lieu of eyeglasses)
Contact lens evaluation, fitting, and follow-up	Once every calendar year (in lieu of eyeglasses)

## Plan highlights\*

Service	Basic plan	Expanded plan
Eye exam	\$0 copay	\$10 copay
Exclusive Collection (Fashion / Designer / Premier)	\$0 copay / \$15 copay / \$40 copay	\$0 copay - All tiers covered-in-full
Visionworks frames	Covered-in-full	Covered-in-full
Retail frame allowance	80% of balance over \$55	80% of balance over \$150



Please confirm all services are covered through the Davis Vision® plan with your eye doctor before services are performed.

\*Actual costs and benefits may vary based upon plan design selected. Exclusions and limitations may apply.

Service	In-network member cost <sup>1</sup>	Out-of-network member cost <sup>1</sup>
Eye exam with dilation as necessary	\$0 copay	100% of balance over \$35
Retinal imaging	\$39 copay	100% of charge
Contact lens fit and follow-up (standard and premium)	80% of charge	100% of charge
<b>Eyeglass benefit—frame</b>		
Retail frame	80% of balance over \$55 <sup>2</sup>	100% of charge over \$55 for frames and lenses combined
Visionworks frame	Covered-in-full	N/A
The Exclusive Collection <sup>3</sup> (in lieu of retail frame): Fashion / Designer / Premier selection	\$0 / \$15 / \$40 copay	N/A
<b>Eyeglass benefit—spectacle lenses</b>		
Single vision, bifocal, trifocal and lenticular lenses	\$0 copay	See above
Standard progressive	80% of balance over \$55; not to exceed \$65 out-of-pocket	See above
Premium progressive	80% of balance over \$55; not to exceed \$105 out-of-pocket	See above
Ultra progressive	80% of balance over \$55; not to exceed \$140 out-of-pocket	100% of charge
Ultimate progressive	80% of balance over \$55; not to exceed \$175 out-of-pocket	100% of charge
High-index 1.67	80% of charge not to exceed \$60	100% of charge
High-index 1.74	80% of charge not to exceed \$120	100% of charge
UV treatment	80% of charge up to \$15	100% of charge
Tint (solid and gradient)	80% of charge up to \$15	100% of charge
Standard plastic scratch coating	\$0 copay	100% of charge
Premium scratch-resistant coating	80% of charge up to \$30	100% of charge
Standard polycarbonate (adult/children <sup>4</sup> )	80% of charge up to \$35 / \$0	100% of charge
Anti-reflective coating (Standard / Premium / Ultra / Ultimate)	80% of charge up to \$40 / \$55 / \$69 / \$85	100% of charge
Polarized	80% of charge up to \$75	100% of charge
Plastic photochromic lenses	80% of charge up to \$70	100% of charge
Scratch protection plan: single vision/multifocal lenses	\$20 copay / \$40 copay	100% of charge
Trivex lenses	80% of charge up to \$50	100% of charge
Digital single vision (intermediate) lenses	80% of charge up to \$30	100% of charge
Blue light filtering	80% of charge up to \$15	100% of charge
Other add-ons and services	80% of charge	100% of charge
<b>Contact lenses</b>		
Conventional and disposable	80% of balance over \$55	100% of charge over \$30
Visually required <sup>5</sup>	80% of balance over \$155	100% of charge over \$80

<sup>1</sup>Member pay will not be greater than the copay, but could be less based upon the actual charge.

<sup>2</sup>\$0 copay for eyeglass frames at Visionworks.

<sup>3</sup>Collection is available at most participating eye care professional offices. Collection is subject to change.

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

<sup>5</sup>If visually required as first contact lenses following cataract surgery, or multiple pairs of rigid contact lenses for treatment of keratoconus.

\* Actual costs and benefits may vary based upon plan design selected. Exclusions and limitations may apply.

Service	In-network member cost <sup>1</sup>	Out-of-network member cost <sup>1</sup>
Eye exam with dilation as necessary	\$10 copay	100% of balance over \$50
Retinal imaging	\$39 copay	100% of charge
Contact lens fit and follow-up (standard and premium)	\$50 copay / \$60 copay	100% of charge / 100% of charge
<b>Eyeglass benefit—frame</b>		
Retail frame	80% of balance over \$150 <sup>2</sup>	100% of charge over \$75
Visionworks frame	Covered-in-full	N/A
The Exclusive Collection <sup>3</sup> (in lieu of retail and Visionworks frame):		
Fashion selection	\$0 copay	N/A
Designer selection	\$0 copay	N/A
Premier selection	\$0 copay	N/A
<b>Eyeglass benefit—spectacle lenses</b>		
Single vision lenses	\$0 copay	100% of balance over \$35
Bifocal lenses	\$0 copay	100% of balance over \$55
Trifocal lenses	\$0 copay	100% of balance over \$70
Lenticular lenses	\$0 copay	100% of balance over \$70
Standard progressive	\$50 copay	100% of balance over \$55
Premium progressive	\$90 copay	100% of balance over \$55
Ultra progressive	\$140 copay	100% of charge
Ultimate progressive	\$175 copay	100% of charge
High-index 1.67	\$60 copay	100% of charge
High-index 1.74	\$120 copay	100% of charge
UV treatment	\$10 copay	100% of balance over \$10
Tint (solid and gradient)	\$15 copay	100% of balance over \$10
Standard plastic scratch coating	\$0 copay	100% of balance over \$10
Premium scratch-resistant coating	\$30 copay	100% of balance over \$10
Standard polycarbonate (adult/children <sup>4</sup> )	\$30 copay / \$0 copay	100% of balance over \$10
Anti-reflective coating (Standard / Premium / Ultra / Ultimate)	\$40 / \$55 / \$69 / \$85 copay	100% of balance over \$10
Polarized	80% of charge up to \$75	100% of charge
Plastic photochromic lenses	80% of charge up to \$70	100% of charge
Scratch protection plan: single vision/multifocal lenses	\$20 copay / \$40 copay	100% of charge
Trivex lenses	\$50 copay	100% of charge
Digital single vision (intermediate) lenses	\$30 copay	100% of charge
Blue light filtering	\$15 copay	100% of charge
Other add-ons and services	80% of charge	100% of charge
<b>Contact lenses</b>		
Conventional and disposable	80% of balance over \$140	100% of charge over \$55
Visually required <sup>5</sup>	\$0 Copay	100% of charge over \$200

<sup>1</sup>Member pay will not be greater than the copay, but could be less based upon the actual charge.

<sup>2</sup>\$0 copay for eyeglass frames at Visionworks.

<sup>3</sup>Collection is available at most participating eye care professional offices. Collection is subject to change.

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

<sup>5</sup>If visually required as first contact lenses following cataract surgery, or multiple pairs of rigid contact lenses for treatment of keratoconus.

\* Actual costs and benefits may vary based upon plan design selected. Exclusions and limitations may apply.

## Value-added services\*

- **One-year breakage warranty** included on all plan-covered eyeglasses (i.e., all spectacle lenses, Davis Vision® Exclusive Collection frames and national retailer frames where our Exclusive Collection is not available). Location may or may not participate in offering the Exclusive Collection of frames. Please refer to an explanation of the Exclusive Collection below for greater detail.
- **Discounts on LASIK procedures.** Visit [qualsight.com/-state-of-tn](https://qualsight.com/-state-of-tn) or call (877) 515-3937 for information.
- **Savings up to 40% off premium hearing aids through Your Hearing Network.** Visit [davisvision.yourhearing.com](https://davisvision.yourhearing.com) or call (888) 809-0044 for more information on pricing and participating audiologists and otolaryngologists (ENT).
- **Partial reimbursements are available for services provided by an out-of-network eye care professional.** Claim forms are available online at [davisvision.com/stateoftn](https://davisvision.com/stateoftn). (You will receive the full value of your benefit dollars if you select an in-network eye care professional.) Please note that out-of-network value-added services are not covered by benefit and member will be responsible for 100% of charge.

Value-added services <sup>1</sup>	Basic plan	Expanded plan
Laser vision correction (for select eye care professionals)	Member is responsible for 85% of retail price; 95% of promotional price	Member is responsible for 85% of retail price; 95% of promotional price
Additional pair of eyeglasses	Member is responsible for 70% of charge	Member is responsible for 60% of charge
Additional pair of conventional or disposable contact lenses	Member is responsible for 80% of charge	Member is responsible for 80% of charge

<sup>1</sup> Member pay will not be greater than the copay, but could be less based upon the actual charge. Out-of-network value-added services are not covered by benefit and member will be responsible for 100% of charge.

\*Actual costs and benefits may vary based upon plan design selected. Exclusions and limitations may apply.

# Envision a world with better hearing

Hearing tests are simple, painless and widely available. This hearing healthcare plan is accessible to you and your family members through your plan.



## Recognizing the signs of hearing loss

The signs of hearing loss can be vague and develop slowly, or they can be obvious and begin suddenly. Regardless, struggling to hear certain sounds or syllables is a telltale symptom of hearing loss.

If you recognize any signs of hearing loss in yourself or a loved one, it's important to seek help. Get started by scheduling your free hearing exam with a Your Hearing Network provider in your area today.



### Quality

Our highly skilled network of credentialed hearing care professionals provide you with quality care.



### Savings

Significant savings including up to 40% off premium hearing aids.



### Accessibility

Your Hearing Network is a national network with licensed hearing care providers near you.

## Start your hearing health journey today

Hearing exam	FREE
Trial period	60-day money back guarantee
Follow-up care	1-year
Warranty	4-year service, including 1-year of loss and damage
Batteries	4-year supply included with each hearing aid purchase

Hearing healthcare services administered by 

**Ready to schedule your consultation with a local hearing care professional today?**

Visit [davisvision.yourhearing.com](https://davisvision.yourhearing.com) or call (888) 809-0044 for more information on hearing aid discounts.



# Say hello to the Davis Vision® mobile app

Register your member account at [davisvision.com/member](https://davisvision.com/member) and then download the Davis Vision mobile app for your iOS or Android device.



## Find an eye care professional

Easily find an eye care professional based on your current location, or search by city, ZIP code, or name.

## Check your eligibility and benefits

Quickly check your current or future eligibility status. Need a little more detail? You can also review your benefit.

## Request an ID card

Need your member information? Find it and personalize it with your photo (optional).

## Review your claims and status

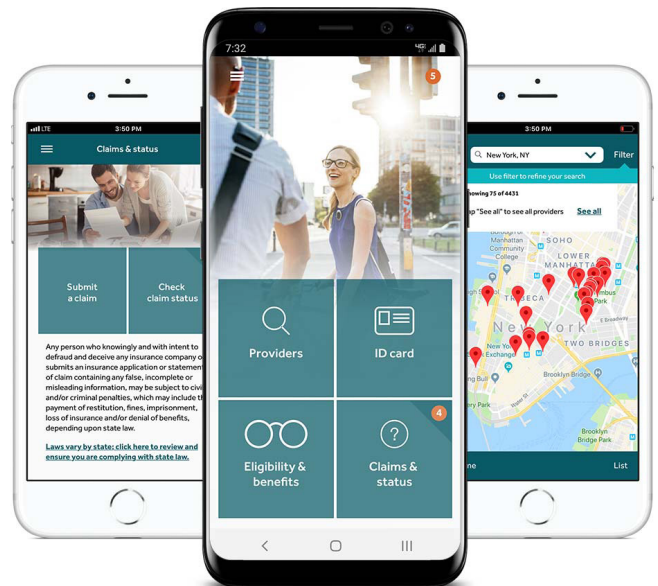
Check out your current claims and history. Plus, upload a photo of your receipt to easily submit an out-of-network claim.

## Other tools and resources

Be sight-savvy with calculators, a frame try-on tool, a vision reference library, and more.



**Need more information?**  
Go to [davisvision.com/app](https://davisvision.com/app) to learn more and see the app in action.



# The Exclusive Collection of Frames

Members are offered a selection of over 200 fashionable frames for little-to-no out-of-pocket cost. You'll find the Exclusive Collection at participating in-network eye care professional locations.

Our convenient tagging system is designed to streamline understanding of your member out-of-pocket cost. Actual costs and benefits may vary based upon plan design selected. Exclusions and limitations may apply.



**Fashion/yellow tag**—Functional and classic with designs for the whole family

Basic plan: \$0 copay | Expanded plan: \$0 copay



**Designer/red tag**—Stylish options with brands like Robert Mitchell®, Lucky Brand®, Jones NY®, and more

Basic plan: \$15 copay | Expanded plan: \$0 copay



**Premier/blue tag**—Fashion-forward choices from brands like Perry Ellis®, Catherine Deneuve®, and Candies®

Basic plan: \$40 copay | Expanded plan: \$0 copay



You'll find the Davis Vision® Exclusive Collection at participating in-network eye care professional locations



# Frequently asked questions

## How do I enroll?

To enroll, sign up within 30 calendar days from your date of hire. If you do not enroll when initially eligible, you must wait until the next Annual Enrollment period to enroll, unless you experience a special qualifying event (SQE).

For more details about the plan, log on to [davisvision.com/stateoftn](https://davisvision.com/stateoftn) or call (800) 208-6404.

## Is my family covered?

Once enrolled, log in to your member account and click on "Check Eligibility" to see who is covered. You can add (or drop) dependents to your plan during the Annual Enrollment period or in the case of a special qualifying event (SQE).

## When does my coverage end?

Please refer to the "Termination of Insurance" and "Continuation" sections in either your Basic or Expanded sample certificate to verify the date your coverage will end upon terminating your benefit or leaving employment. You may also ask your ABC, HR Representative, or employer to assist you in this matter.

## What information will my eye doctor need?

When scheduling your appointment with an in-network eye care professional, it's best to have your member number so they can quickly verify eligibility. However, you can also use the head of contract's first/last name and the state in which they live.

## Where do I find my member number?

Your member number can be found on your Davis Vision® Member ID card, by logging in to your Davis Vision account, or by calling us at (800) 208-6404.

## Do I get a member ID card? What happens if I lose it?

Yes, the head of contract will receive a Member ID Card; covered dependents do not. However, you do not need the ID card to use your benefits. Replacement cards can be ordered through your online account or by calling (800) 208-6404.

## What are your hours of operation?

Our customer care center is open seven days a week at convenient times for all areas of the country and can be reached at (800) 208-6404. The operating hours are:

	ET		CT
M-F	8 a.m.–11 p.m.	M-F	7 a.m.–10 p.m.
Sat.	9 a.m.–4 p.m.	Sat.	8 a.m.–3 p.m.
Sun.	12 p.m.–4 p.m.	Sun.	11 p.m.–3 p.m.



**Participation requirements** means an agency must be participating in the State of Tennessee Sponsored Group Health Plan in order to qualify for participation in the State of Tennessee Voluntary Group Vision Insurance Program. An active Employee and/or Dependent's participation in the State Sponsored Group Health Plan is not required to participate in the State Group Vision Insurance Program. A Retiree and/or Dependent's participation in the State Sponsored Group Health Plan is required to participate in the State Group Vision Insurance Program. Employee or Retiree's participation in the State Group Vision Insurance Program is required for participation of eligible Dependents, except Dependents of Retirees may continue enrollment in the State Group Vision Insurance Program after the Retiree is no longer eligible for the State Group Health Insurance Plan and State Group Vision Insurance Program due to reaching the age for Medicare as long as the Dependents remain enrolled in the State Group Health Insurance Plan. Participation by those enrolled in the State Group Vision Insurance Program is on a calendar year basis, and enrollment may only be dropped by the participants during the Annual Enrollment Period for the beginning of the next calendar year or due to a special qualifying event (SQE).

## What if my eye care professional is not in-network?

The Basic Plan offers limited out-of-network benefit options, while the Expanded Plan offers more reimbursement options. (See plans on pages 4 and 5 for more details.) To submit an out-of-network claim, visit [davisvision.com/stateoftn](https://davisvision.com/stateoftn) and click on "Access Benefits and Forms" to download the Direct Reimbursement Claim Form. Follow the instructions on the form to submit your claim. You must include either your eye care professional's signature or a detailed receipt. You can request to add an eye care professional to your network under "Find an eye care professional" at [davisvision.com/stateoftn](https://davisvision.com/stateoftn).

**Tip: Download the the Direct Reimbursement Claim form from the member portal and bring it with you to your appointment for easy completion of the eye care professional information and for their signature.**

## What is included in an eye examination?

An eye exam takes roughly an hour and consists of a variety of checkups which include a health review, simple visual acuity tests, refraction test, visual field test, glaucoma test, slitlamp evaluation and dilation. A comprehensive eye health exam can detect a number of eye diseases, as well as signs of systemic conditions such as diabetes, thyroid disease, high blood pressure and neurological impairments. Every eye exam our eye care professionals administer is consistent with clinical guidelines published by the Eye American Optometric Association and the American Academy of Ophthalmology.

## What is a dilated retinal exam?

A Dilated Retinal Examination (DRE) is a critical diagnostic procedure in the detection and management of diabetes, glaucoma, hypertension and many other ocular and/or systemic diseases (up to 30 altogether). It can lead to higher quality patient care, improved lifestyle through early detection and intervention, and possibly lower your overall health care costs.

## Do I have to get all the services completed at the same time?

As a Davis Vision® member, you can get an eye exam and shop for eyewear at different times and in different locations. For example, you may get your eye exam from an eye care professional and then use your prescription to shop for glasses at an in-network retailer at a later date within the same plan year.

## Does my whole family have to visit the same eye care professional?

No. Plan dependents can visit different eye care professionals. For example, students who are away at school can locate a participating eye care professional near them.

## Can I get both glasses and contact lenses?

No. Your plan benefits will cover eyeglasses or contact lenses, but not both. We are, however, able to offer our members additional discounts on certain eyewear and eye care purchases even after the plan allowances have been used. Log in to your account to view plan details, or call us at (800) 208-6404.

## What if my glasses break?

All eyeglasses come with a one-year breakage warranty for repair or replacement of the frame and/or lenses, which applies to all plan-covered eyeglasses (i.e., all spectacle lenses, Davis Vision Exclusive Collection frames, and national retailer frames where our Exclusive Collection is not available). So, if your glasses break, simply return them to where you purchased them.

## Can I use my insurance when shopping online?

Your Davis Vision benefits are available for in-network use online at [visionworks.com](https://visionworks.com). Online purchases for glasses or contacts at other sites are currently considered out-of-network. Your benefits will work the same at [visionworks.com](https://visionworks.com) as they would in-store at a Visionworks location.

## Buy eyewear online with your benefits

You can use your vision care benefits to buy eyewear online from **1-800 Contacts**, **Befitting**, **Glasses.com**, and **Visionworks**.

### 1 800 contacts®

1-800 Contacts is one of the most recognized online contact lens retailers in the industry. They have an established reputation for their customer service, backed by an industry-leading Net PromoterScore of 76. Learn more: [1800contacts.com](https://www.1800contacts.com)

### befitting

a better way to buy glasses you love

Befitting has artificial intelligence-driven tools to find the perfect pair of eyeglasses with personalized, curated recommendations. Shop for single and progressive lenses, prescription sunglasses, and advanced blue light blocking lenses. Free shipping and returns are also included. Learn more: [befitting.com](https://www.befitting.com)

### GLASSES . COM

Glasses.com is one of the most trusted online stores for popular eyewear brands, including prescription glasses and sunglasses. Learn more: [glasses.com](https://www.glasses.com)

### Visionworks

Look up your benefits and see the savings on thousands of different frames and contact lenses as you shop. Learn more: [visionworks.com](https://www.visionworks.com)



#### What kind of brands do the online retailers carry?

All of the online retailers feature top brands of both frames and contacts.

#### Do I need a prescription to order products online?

Yes; you will need to enter your prescription at the time of purchase, and require a recent valid prescription to purchase contact lenses online.

#### Are the benefits the same as other retail stores?

Yes; you can use your full benefit.

#### Is the Davis Vision® Exclusive Collection included?

No; the Exclusive Collection are not offered at this time.

## Basic plan premium rates\*

Employee/retiree rates	Monthly	Annually
Employee	\$3.07	\$36.84
Employee + child(ren)	\$6.13	\$73.56
Employee + spouse	\$5.82	\$69.84
Employee + family	\$9.01	\$108.12

## Expanded plan premium rates\*

Employee/retiree rates	Monthly	Annually
Employee	\$5.56	\$66.72
Employee + child(ren)	\$11.12	\$133.44
Employee + spouse	\$10.57	\$126.84
Employee + family	\$16.35	\$196.20

**Need further assistance?**  
Give us a call:  
**(800) 208-6404**

\* Actual costs and benefits may vary based upon plan design selected. Exclusions and limitations may apply.

Eligibility for vision benefits may be affected by certain life events. Life event means one of the following: (1) your marriage or divorce; (2) the death of your spouse; (3) the birth or adoption of your Child; (4) the death of your Child; (5) a change in the employment status of your spouse; or (6) a change in your employment status or a qualifying event as defined by the State of Tennessee.

The Schedule of Benefits in this document reflects, unless otherwise approved by the State, the procedures that vision will cover as well as certain limitations and exclusions for these covered benefits. These services will be covered when a vision eye care professional provides them. These services must be necessary and must be provided in accordance with generally accepted vision practice standards. If the total benefit charge for a Member is less than the benefit cost-sharing, the Member shall pay the lesser charge. In addition to the limitations and exclusions shown in the Schedule of Benefits section, the Vision Plan does not pay for the following unless otherwise approved by the State:

### General Limitations & Exclusions

- A. Treatment of injury or illness covered by Workers' Compensation or Employer's Liability Laws.
- B. Services received without cost from any federal, state or local agency. This exclusion will not apply if prohibited by law.
- C. Cosmetic surgery or procedures for purely cosmetic reasons.
- D. Charges by any hospital or other surgical or treatment facility and any additional fees charged by the vision for treatment in any such facility.
- E. Services by an eye care professional beyond the scope of his or her license.
- F. Vision services for which the patient incurs no charge.
- G. Vision services where charges for such services exceed the charge that would have been made and actually collected if no coverage existed.
- H. Orthoptic or vision training, subnormal vision aids and any associated supplemental testing; Aniseikonic lenses.
- I. Any eye or Vision Examination, or any corrective eyewear required by a Policyholder as a condition of employment; Safety eyewear.
- J. Lost or broken lenses, frames, glasses, or contact lenses will not be replaced except in the next Benefit Frequency when Vision Materials would next become available.

### Optional Materials & Services

If the materials and services rendered exceed the covered benefit, the difference for the actual materials or services rendered is due from the member.

We comply with applicable Federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability, or sex.

Davis Vision® coverage is underwritten by HM Life Insurance Company, Pittsburgh, PA, under policy form series HMP 902-VIS or similar. The coverage or service requested may not be available in all states and is subject to individual state approval.