## visioncare plan

## What to expect from your vision plan:

Your eyesight is nothing to take for granted. It's how we see a loved one's face clearly or a beautiful sunset.

But your sight can begin to deteriorate over a long period of time without your knowing there is a problem.

As with any other important asset – like your home or car – wouldn't you feel more at ease if you knew your routine eye care was covered by a company with decades experience helping people like you? With CompBenefits' VisionCare Plan, you can take advantage of coverage you need for eye examinations and eyeglasses or contacts.

You can also choose to take advantage of VisionCare Plan's deep discount for LASIK surgery.

And you won't have to hunt hard to find a doctor close to your home or work. The VisionCare Plan network includes some 14,000 ophthalmologist and optometrist locations – one third of all private practitioners in the country. Yet, it doesn't mean you can't see an out-of-network doctor because VisionCare Plan offers benefits in-network or out-of-network. It's your choice.

# You'll find what you need @ www.mycompbenefits.com

CompBenefits has made understanding and accessing your VisionCare Plan benefits simple. Just take a few moments to register at www.mycompbenefits.com.



No claims to file! Just show your VisionCare Plan ID card





Open your eyes to high-quality vision care! The average family spends close to \$600 each year on routine eye health care. Using CompBenefits' VisionCare Plan, you will receive your routine eye health care with just a small copayment.

CompBenefits' VisionCare Plan provides benefits for covered:

- > Eye health examinations
- Frames
- Eyeglass Lenses
- Contact Lenses

Plus you will receive:

- LASIK surgery discount
- Preferred member pricing for other frame and lens options\*

When ordering from one of our network eye doctors, you will also receive in the year of your eye exam:

- A 20% discount on a second pair of eyeglasses
- > A 15% discount on your contact lens fitting fee

#### SERVICE FREQUENCY COPAYMENTS (times 2) Based on two dependents

Vision exam:Once every 12 monthsExam:\$10Lenses:Once every 12 monthsMaterials:\$15

Frame: Once every 24 months

#### SAVINGS! SEE THE DIFFERENCE

You can save money two ways with VisionCare. First, the cost of plan services and materials is discounted and prepaid. So **except for any co-payments**, you have **no out-of-pocket expenses** for covered services and supplies when you use one of our network doctors. Second, your coverage costs are deducted from your pay *before* any federal income or FICA taxes are taken out. This makes your taxable wage base lower, so you would pay less tax.

Here's an **example** of how the plan helps you save over the course of a year:

If You Get:	You Pay:	
	VisionCare	Typical
	Doctor	Retail
Eye exam	.00	\$ 170.00
Frame (designer style)	.00	240.00
Lenses: Bifocal	.00	200.00
Option (pink tint #1 or #2)	.00	30.00
Co-payments times 2:		
\$10 exam/\$15 materials	\$ 50.00	.00
Premium (\$11.12 monthly x 12)	+ 133.44	.00
	\$ 183.44	\$ 640.00
Pre-tax savings (assuming 15% tax bracket & 7.65% FICA)	- 30.22	+ .00
Total Cost	\$ 153.22	\$ 640.00



#### YOUR TOTAL SAVINGS THROUGH VISIONCARE: 76% OFF RETAIL

In this example, you would have saved \$486.78 in vision care costs with VisionCare Plan. Keep in mind, however, that your actual savings will depend on your plan allowances, your actual premium, the doctors and materials you select, and your own tax situation.

<sup>\*</sup> This is not a schedule of maximum benefits. For example, the plan covers frames based on the manufacturer's *wholesale* price guide. So while the retail price of a covered frame may vary among plan doctors, the *value* of your covered frame stays the same. Typically, the wholesale frame allowance is equivalent to a retail price of \$80-150. You may be required to pay extra only if you choose a frame that exceeds the covered wholesale price.

Maximum Allowances	Participating Doctor	
	(After copayments/	
	Up to plan limits)	

Eye Exam Paid in full

Lenses (per pair)

Single Paid in full

Bifocal Paid in full

Trifocal Paid in full

Lenticular Paid in full

Contact Lenses

Elective

(exam & lenses) \$120\*

Medically necessary\*\* Paid in full

Frame \$40 wholesale

Lasik\*\*\*

Members receive benefits when services are received from a TLC Truvision network provider with the following preferred rates:

- Silver Package: \$895/eye for Conventional LASIK
- Gold Package: \$1,295/eye for CustomLASIK
- Platinum Package: \$1,895/eye for CustomLASIK plus Bladeless LASIK (using IntraLase technology).

Members will also receive a 10% discount off UCR charges at other preferred LASIK provider locations, and pay no more than \$1,800 per eye for the Conventional LASIK procedure and \$2,300 per eye for CustomLASIK.

- \* This allowance is paid with the same frequency as lenses, in place of all other benefits.
- \*\* Medically necessary (prior authorization required) is defined as 1) following cataract surgery w/o intraocular lens; 2) correction of extreme visual acuity problems not correctable with glasses; 3) anisometropia greater than 5.00 diopters and asthenopia or diplopia, with spectacles; 4) Keratoconus; or 5) monocular aphakia and/or binocular aphakia where the doctor certifies contact lenses are medically necessary for safety and rehabilitation to a productive life.
- \*\*\* Plan members must first contact CompBenefits for a list of providers and to receive a Refractive Care ID card.

This schedule shows only a few of the covered procedures. Please see your Benefit Administrator for a complete schedule. This schedule is intended for comparison purposes only. The benefits of each plan will be determined by the contract. For a complete listing of benefits and exclusions and limitations, please reference your certificate of coverage.

Out-of-network benefits apply under the VisionCare Plan, but benefits are higher when a participating doctor is utilized

Limitations and Exclusions apply.

#### **HOW DOES VISIONCARE PLAN WORK?**

Members simply select any in-network optometrist or ophthalmologist and schedule an appointment. You can locate a providers in your area by accessing the current directory online at <a href="www.mycompbenefits.com">www.mycompbenefits.com</a>. The Plan is simple to use. Select a doctor from our provider directory and call for an appointment. At the time of your appointment, present your ID Card to the participating provider. Members will pay only their co-payments and for any extra cosmetic options selected. There are no additional forms to complete or claims to file.

Members can also choose an out-of-network provider. In this case, you will pay the doctor at the time of the visit and submit receipts to Compbenefits for reimbursement.

#### **CAN I GET CONTACTS INSTEAD OF LENSES?**

Yes. If you prefer contact lenses, the plan provides an allowance of \$120.00 in place of all other benefits.

#### **HOW DO I GET FURTHER QUESTIONS ANSWERED?**

You may contact CompBenefits Customer Care Department with any questions or concerns at: 1-800-865-3676, Monday – Thursday 8am-8pm; and Friday 8am-6pm EST. or locate us on the web at www.mycompbenefits.com.

## frequently asked questions

## **Q.** What are CompBenefits' VisionCare Plans?

**A.** CompBenefits' VisionCare Plans are network-based vision plans that emphasize high quality routine eye health care from independent eye care professionals. Services and materials are provided on a pre-paid basis, and the plans pay network doctors directly. VisionCare Plan members can also use non-network doctors if they wish.

### **Q.** How does VisionCare Plan work?

**A.** Members simply select any in-network optometrist or ophthalmologist and make their appointments. At the time of the appointment, members pay only their co-payments and for any extra cosmetic options selected. There are no forms to complete or claims to file.

Members can also choose an out-of-network provider. In this case, they pay their doctor at the time of the visit and submit receipts to CompBenefits for reimbursement. Benefits are paid according to a reimbursement schedule.

## **Q.** Are there any limitations to my vision benefit?

A. Yes, there are a few. Oversized lenses, when prescribed, may be covered only when patient's face size indicates they are necessary. Blended and progressive lenses are not normally required for visual welfare and are generally excluded. Elective or cosmetic items such as photochromic lenses, fashion color-coated lenses and sun lenses are not normally covered.

## **Q.** Does VisionCare Plan exclude anything?

- A. Yes, some items and services are excluded.
  - Orthoptics or vision training, subnormal vision aids or plano (non-prescription) lenses
  - Replacement of lost or broken lenses, except at the regularly-scheduled plan intervals
  - Medical or surgical treatment of the eyes
  - Care provided through or required by any government agency or program, including Workers' Compensation or similar law

## **Q.** What do I need to access my benefits?

A. It's simple. Just take your VisionCare Plan ID card to your eye doctor, and he or she will file your claim for you.

## **Q.** Can I go online to find out more about my plan or get assistance?

**A.** Yes. You can visit www.mycompbenefits.com to learn about your plan, to check your benefits, to use our Provider Locator, to send us an e-mail and more.