



StaffScapes

Human Resource Solution Center

EyeMed Vision Plan

Introducing *Vision by Design*

What is *Vision by Design*? It's a managed vision care program combining unlimited choice with high quality and value. *Vision by Design* is underwritten by Companion Life Insurance Company and marketed exclusively in Colorado by Beta Health Association, Inc. (BHA). The provider network, customer service and claim administration is through EyeMed Vision Care.

Extensive Provider Network

Unlike other programs that may restrict provider options, *Vision by Design* offers a nationwide network of convenient, accessible options for eye care. BHA, in association with Companion Life and EyeMed Vision Care, offers easy access to thousands of conveniently located vision care providers including optometrists, ophthalmologists, opticians and many leading optical retailers, such as LensCrafters®, Target Optical®, and most Sears Optical® and Pearle Vision® locations.

- access to more than 43,000 vision care providers at 18,000 convenient locations nationwide
- evening and weekend hours at many locations
- choice of thousands of fashionable, designer frames
- no appointment necessary, and service in "about an hour" in most locations



Quality Vision Care

EyeMed has a firm commitment to quality and patient satisfaction. All EyeMed Vision Care providers must meet NCQA credentialing standards. Providers are monitored through EyeMed's Quality Assurance Program and re-credentialing process.

Quality Products

Vision by Design members have unlimited choice of available eyewear products. Our members are free to select from any available frame including designer frames by Luxottica, such as Vogue®, Brooks Brothers®, Anne Klein®, and many more.

Superior Value & Service Excellence

Members enjoy savings of up to 40% off retail prices, with continued savings after the initial benefit has been used. EyeMed focuses on delivering service excellence throughout all areas of program administration, featuring call center representatives available seven days a week, including evenings. They combine innovative solutions with the most current technology to enhance the administrative experience for both clients and members.

Employee Only: \$7.44/month	Employee & Spouse \$14.03/month	Employee & Family \$20.54/month
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Vision Select *Vision by Design*[®]

Effective Date: 06/01/07

Vision Select	Exam and Eyewear	
<u>Vision Care Services:</u> Exam with Dilation (as necessary): Contact Lens Fit and Follow-up: (Contact lens fit and two follow-up visits are available once a comprehensive eye exam has been completed) Standard* Premium**	<u>In-Network Only</u> \$10 Copay \$0 Copay \$0 Copay, 10% off retail, then apply \$55 allowance	<u>Out-of-Network</u> \$35 Allowance \$40 Allowance \$40 Allowance
<u>Frames:</u> Any available frame at provider location	<u>In-Network Only</u> \$130 Frame allowance, 20% off balance over allowance	<u>Out-of-Network</u> \$72 Allowance
<u>Standard Plastic Lenses:</u> Single Bifocal Trifocal	<u>In-Network</u> \$10 Copay \$10 Copay \$10 Copay	<u>Out-of-Network</u> \$25 \$40 \$55
<u>Lens Options:</u> UV Coating Tint (Solid and Gradient) Standard Scratch Resistant Coating Standard Polycarbonate Standard Anti-Reflective Coating Standard Progressive (Add-On to Bifocal) Other Add-Ons and Services	<u>In-Network Member Pays:</u> \$15 \$15 \$15 \$40 \$45 \$65 20% off retail	<u>Out-of-Network</u> Discount available only at Network providers and retailers
<u>Contact Lenses (Material Only):</u> Medically Necessary	<u>Conventional and Disposable:</u> <u>In-Network</u> \$0 Copay, \$120 allowance, 15% off balance over allowance (conventional only). Paid in full.	<u>Out-of-Network</u> \$96 allowance \$200 allowance
<u>Frequency:</u> Examination Frames Eyeglass Lenses Contact Lenses (in lieu of eyeglass lenses)	12 months 12 months 12 months† 12 months††	
Call 866-723-0596 to locate the nearest EyeMed provider, or visit EyeMedVisionCare.com.		

*Standard Contact Lens Fitting: spherical clear contact lenses in conventional wear planned replacement (examples include, but not limited to, disposable, frequent replacement, etc.).

**Premium Contact Lens Fitting - all lenses design, materials and fittings other than Standard (examples include, but not limited to, toric, multifocal, etc.)

†Eyeglass lenses are paid in lieu of the contact lenses benefit. Once in a 12-month period defined by last date of service.

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Disclaimer: This is a summary of benefits only. Please refer to the policy for comprehensive benefit details. Payment is based upon allowable charges in the area in which the service is rendered.

