DAVISVISION®

SEE LIFE

Vision Care Plan Benefit Description

Sponsored by, and administered on behalf of the members and dependents of

Solstice
Dunkirk

For information prior to enrolling visit Davis Vision's Website at: **www.davisvision.com**, *select the member option and enter client control code* ***2336*** *or call* **1-888-575-0199** *(toll free).*
Once enrolled, please visit Davis Vision's website: **www.davisvision.com,** *or call* **1-888-575-0199** *with questions*

Dunkirk is pleased to provide this information about your vision care plan administered by Davis Vision, Inc., a leading national administrator of vision care programs. Eligibility for vision care benefits is determined by the same rules that apply to your health care benefits.

How do I receive services from a provider in the network?

- Call the network provider of your choice and schedule an appointment.
- Identify yourself as a Davis Vision and Dunkirk member or dependent.
- Provide the office with the member ID number and the name and date of birth of any covered dependent needing services.

It's that easy! The provider's office will verify your eligibility for services, and claim forms are not required!

Who are the network providers?

They are licensed providers in both private practice and retail locations who are extensively reviewed and credentialed to ensure that stringent standards for quality service are maintained. Please access Davis Vision's website at **www.davisvision.com** and utilize the "Find a Doctor" feature, or call **1-888-575-0199** to access the Interactive Voice Response (IVR) Unit, which will supply you with the names and addresses of the network providers nearest you.

What are the plan benefits, frequencies and costs?

EYE EXAMINATIONS ..... Every October 1,
including dilation as professionally indicated.

In-Network Copayment $0

Out-of-Network ..... Reimbursed up to $50

EYEGLASSES ..... Every October 1

In-Network Copayment $0

You may choose any Fashion or Designer level frame from Davis Vision's Frame Collection, covered in full. Or, if you select another frame in the network provider's office, a $130 credit, plus a 20% discount* off any overage will be applied. This credit would also apply at retail locations that do not carry the Frame Collection. Members are responsible for the amount over $130. For more information on lenses, please see "What lenses/coatings are included?"

Out-of-Network ..... Reimbursed up to $35
for frames, up to $40 for single vision lenses, up to $65 for bifocals, up to $129 for trifocals, up to $129 for lenticular (post-cataract) lenses.

CONTACT LENSES ..... Every October 1

In-Network Copayment $0

In lieu of eyeglasses, you may select contact lenses. Any contact lenses from Davis Vision's Contact Lens Collection will be covered in full per the number indicated below. If you select contact lenses, your evaluation, fitting and follow up care will also be covered.

Davis Vision Contact Lens Collection (includes evaluation, fitting, follow-up):

Disposable ..... Four boxes/multi-packs
Planned Replacement ..... Two boxes/multi-packs

In lieu of the Davis Vision contact lenses, members may use their $130 credit, plus a 15% discount* off any overage toward the provider's own supply of contact lenses. For specialty contact lenses, a 15% discount* toward evaluation/fitting will apply. This credit would also apply towards all contact lenses received at participating retail locations.

Medically necessary contact lenses will be covered in full with prior approval.

Out-of-Network ..... Reimbursed up to $164 for
elective contact lenses, up to $225 for medically necessary contact lenses with prior approval.

Please note: Contact lenses can be worn by most people. Once the contact lens option is selected and the lenses are fitted, they may not be exchanged for eyeglasses.

** Discount does not apply at participating Walmart locations.*

What lenses/coatings are included?

- Plastic or glass single vision, bifocal or trifocal lenses, in any prescription range.
- Glass grey #3 prescription lenses.
- Oversize lenses.
- Post-cataract lenses.
- Fashion, sun or gradient tinted plastic lenses.
- Polycarbonate lenses for dependent children, monocular patients and patients with prescriptions +/- 6.00 diopters or greater.
- Scratch-resistant coating.

Are there any optional frames, lens types or coatings available?

Yes, you can pay the low, discounted fixed fees indicated (in addition to your basic copayment) and receive these exciting optional items:

- $25 for a Premier frame from the "Collection".
- $30 for polycarbonate lenses.
- $20 for single vision scratch protection plan. Multifocal scratch protection plan is $40.
- $12 for ultraviolet (UV) coating.
- $30 for intermediate vision lenses.
- $35 for standard ARC (anti-reflective coating). Premium ARC is $48. Ultra ARC is $60.
- $75 for polarized lenses.
- $65 for plastic photosensitive lenses.
- $55 for high-index (thinner and lighter) lenses.
- $50 for standard progressive addition multifocal lenses. Premium progressive addition multifocal lenses are $90**

*** Progressive addition multifocals can be worn by most people. Conventional bifocals will be supplied at no additional cost for anyone who is unable to adapt to progressive addition lenses; however, the copayment will not be refunded.*

When will I receive my eyewear?

Generally, your eyewear will be delivered to your provider from the laboratory within five business days. More delivery time maybe needed when out-of-stock frames, anti-reflective coating, specialized prescriptions or a participating provider's frame is selected.

What about out-of-network provider benefits?

You may receive services from an out-of-network provider, although you will receive the greatest value and maximize your benefit dollars if you select a provider who participates in the network. If you choose an out-of-network provider, you must pay the provider directly for all charges and then submit a claim for reimbursement to:

Vision Care Processing Unit
P.O. Box 1525
Latham, NY 12110

Only one claim per service may be submitted for reimbursement each benefit cycle. To request claim forms, please visit the Davis Vision Web site at **www.davisvision.com** or call 1-888-575-0199.

May I use the benefit at different times?

You may "split" your benefits by receiving your eye examination, frame and spectacle lenses or contact lenses on different dates or through different provider locations, if desired. Continuity of care will best be maintained when all available services are obtained at one time from either a network or an out-of-network provider. To maximize your benefit value we recommend that all services be obtained from a network provider.

Information about Low Vision Services:

You and your covered dependents are entitled to a comprehensive low vision evaluation once every five years and low vision aids up to the plan maximum. Up to four follow-up care visits will be covered during the five year period.

Information about Laser Vision Correction Services:

Davis Vision provides you and your eligible dependents with the opportunity to receive Laser Vision Correction Services at discounts of up to 25% off a participating providers normal charges, or 5% off any advertised special (please note that some providers have flat fees equivalent to these discounts). Please check the discount available to you with the participating provider. For more information, please visit us at **www. davisvision.com** or call 1-888-575-0199.

Mail Order Contact Lenses:



Free membership and access to a mail order replacement contact lens service, LENS123®, providing a fast and convenient way to purchase replacement contact lenses at significant savings. For more information, please call 1-800-LENS-123 (1-800-536-7123) or visit the LENS123® website at www.Lens123.com.

Warranty Information:

One-year eyeglass breakage warranty included at no additional cost.

All plan eyeglasses come with a breakage warranty for repair or replacement of the frame and/or lenses for a period of one year from the date of delivery. The warranty applies to all plan covered eyeglasses, i.e. spectacle lenses, Davis Vision Collection frames and national retailer frames (where our exclusive Collection is not displayed).

Are there any exclusions?

The following items are not covered by this vision program:

- Medical treatment of eye disease or injury.
- Vision therapy.
- Special lens designs or coatings, other than those previously described.
- Replacement of lost eyewear.
- Non-prescription (plano) lenses.
- Contact lenses and eyeglasses in the same benefit cycle.
- Services not performed by licensed personnel.
- Two pairs of eyeglasses in lieu of a bifocal.

For more information, please visit Davis Vision's website at www.davisvision.com or call Davis Vision at 1-888-575-0199 to:

- Learn more about your benefits
- Locate a Davis Vision provider
- Verify eligibility
- Print an enrollment confirmation
- Request an out-of-network provider reimbursement form
- Contact a Member Service Representative.

Member Service Representatives are available:

- Monday through Friday, 8:00 AM to 11:00 PM, Eastern Time,
- Saturday, 9:00 AM to 4:00 PM, Eastern Time, and;
- Sunday, 12:00 PM to 4:00 PM, Eastern Time.

Participants who use a TTY (Teletypewriter) because of a hearing or speech disability may access TTY services by calling **1-800-523-2847**.

Your rights as a patient:

Davis Vision recognizes that all patients have specific rights, including, but not limited to:

- The right to complete information about their healthcare options and consequences.
- The right to participate in all treatment decisions.
- The right to dignity, privacy, confidentiality and non-discrimination.
- The right to complain or appeal any decision.

Patients also have the responsibility:

- To provide complete and accurate information.
- To follow care instructions.

For a complete copy of *Your Rights and Responsibilities As a Patient*, please visit Davis Vision's website at: **www.davisvision.com** or call 1-888-575-0199.

"All insured products are underwritten by either HM Life Insurance Company or HM Life Insurance Company of New York."