DeltaVision®

Lee's Summit R-7 School District **BASE PLAN**

Vision benefits summary

Vision care services	In-network member cost	Out-of-network member reimbursement
Exam services		
Exam with dilation as necessary	$10 copay	Up to $40
Retinal imaging	Up to $39	Not covered
Contact lens fit and follow-up		
Fit and Follow-up Standard	$30 allowance	Not covered
Fit and Follow-up Premium	10% off retail price less $30 allowance	Not covered
Frames		
Frame	$0 copay; 20% off balance over $130 allowance	Up to $52
Lenses		
Single Vision	$25 copay	Up to $20
Bifocal	$25 copay	Up to $40
Trifocal	$25 copay	Up to $60
Lenticular	$25 copay	Up to $100
Progressive - Standard	$75 copay	Up to $40
Progressive - Premium tier 1/2/3	$110/$120/$135 copay	Up to $40
Progressive - Premium tier 4	$90 copay; 20% off retail price less $120 allowance	Up to $40
Lens Options		
Photochromic - Non-glass	$60 copay	Not covered
Polycarbonate - Std – Children under 20	$0 copay	Not covered
Polycarbonate - Standard	$40	Not covered
Anti reflective coating - Standard	$45	Not covered
Anti reflective coating - Premium tier 1/2/3	$57/$68/80% of charge	Not covered
Scratch coating - Standard plastic	$15	Not covered
Tint - Solid or gradient	$15	Not covered
UV treatment	$15	Not covered
All other lens options	20% off retail price	Not covered
Contact lens		
Contacts - Conventional	15% off balance over $130 allowance	Up to $78
Contacts - Disposable	balance over $130 allowance	Up to $78
Contacts - Medically necessary	$0 - Paid in full	Up to $250
Other		
Hearing Care from Amplifon NetworkCare	Discounts on hearing aids; call 1.877.203.0675	Not covered
Lasik or PRK from U.S. Laser Network	15% off retail or 5% off promo price; call 1.800.988.4221	Not covered

Frequencies (Plan allows member to receive either contacts and frame, or frames and lens services)

Exam	Once every calendar year
Frame	Once every other calendar year
Lenses	Once every calendar year
Contacts	Once every calendar year

Where allowances are shown you are responsible for all charges in excess the allowance in addition to the applicable copay. Allowances are paid only once during the benefit period and must be fully utilized at time of purchase. Premium progressives and premium anti-reflective designations are subject to annual review by EyeMed's Medical Director and are subject to change based on market conditions. Pricing is reflective of brands at the listed product level. All providers are not required to carry all brands at all levels. Benefits for Medically Necessary Contact Lenses are limited to conditions of aphakia, keratoconus or severe anisometropia. Benefits may not be combined with any discount, promotional offering, or other group benefit plans. The percentage discounts and flat dollar fixed pricing for certain lens options and retinal imaging are discount features, not insured benefits, and may be subject to change. You are responsible for paying the cost of such items directly to the provider. For out of network benefits you are responsible for paying the provider in full at the time of service and submitting a request for reimbursement.

THIS IS A SNAPSHOT OF YOUR BENEFITS REFER TO YOUR CERTIFICATE OF COVERAGE FOR FULL COVERAGE DETAILS, LIMITATIONS AND EXCLUSIONS. For a copy of your Certificate of Coverage consult your employer or plan administrator. DeltaVision® is underwritten by Advantica Insurance Company, a Delta Dental of Missouri Company. Customer service and network administration for DeltaVision are provided through an agreement with EyeMed Vision Care, LLC and claims processing through First American Administrators, Inc., an affiliate of EyeMed. EyeMed Vision Care® is a registered trademark of EyeMed Vision Care, LLC. Delta Dental and DeltaVision are registered trademarks of the Delta Dental Plans Association.

Member benefits are just the beginning

Additional valuable savings for vision plan members

With a DeltaVision plan, we offer exclusive, members-only special offers on vision-related products and services that members can use above and beyond their vision benefit. It's one way we can help them keep their eyes healthy and save some cash too.

Save 40%	Save 20%	Save 20%	Save 15%	Save 15%	Save up to 64%
on additional pairs of glasses	on any remaining frame balance	on any item not covered by the plan	on any balance over the conventional contact lens allowance	on LASIK	off retail price on thousands of hearing aids from top brands*

*These discounts are not insured benefits and are available from in-network providers only. *Average savings based on Amplifon Hearing Health Care average member savings data for 2022.*

Important to remember

Here are some tips to help you get the most out of your DeltaVision benefits:

- When the benefit includes an allowance, you are responsible for charges over that allowance in addition to the applicable copay.
- When you visit an in-network provider, you are responsible for your exam copay at the time of your visit and any applicable materials copay(s) at the time of your purchase.
- If you use an out-of-network provider, you must pay the full cost of the services provided at the time they are received. Submit your claim to DeltaVision within 12 months of the date of service for reimbursement. You will be reimbursed the lesser of the provider's charge or the amount shown.
- Exam and material frequencies will restart at the beginning of each calendar year.

The choice is always yours

The Insight vision network gives you choices — lots of them. Be it an independent eye doctor, popular retailer or online option, with the Insight network you get the latest in advanced vision technology to see even the slightest vision issue. And with more providers across more locations, you're free to see the one who fits your needs the best.

Independent providers

The Insight network makes it easy to find a trusted neighborhood eye doctor.

Retail providers

With options including LensCrafters®, Pearle Vision®, Target Optical® and many other favorite regional retailers, you can pick the location and hours that work for you.

Shop online

Staying in-network can also mean using your vision benefits online at:

- Lenscrafter.com
- Targetoptical.com
- Ray-ban.com
- Glasses.com
- Contactsdirect.com

INDEPENDENT PROVIDER NETWORK + LENSCRAFTERS PEARLE VISION EST. 1961 TARGET OPTICAL

We are here to help

With DeltaVision, our goal is to make vision benefits simple. Not only do you have access to an award-winning call center, with extended hours, you also have 24/7 access to benefit information and our Provider Locator through our member portal. Our vision portal at DeltaDentalMO.com/Vision is your one-stop-spot to quickly and easily manage your vision benefit. There, you can:

- View benefit details
- Confirm eligibility
- Check claim status
- Print a replacement ID card
- Locate an in-network provider
- Schedule an appointment online
- Get health and wellness information
- Access currently available special offers for members-only savings!

Visit **DeltaDentalMO.com/Vision** or call **(877) 226-1412** to learn more.