

Vision Benefit Summary

Group Number: 00415917

About Your Benefits:

Eye care is a vital component of a healthy lifestyle. With vision insurance, having regular exams and purchasing contacts or glasses is simple and affordable. The coverage is inexpensive, yet the benefits can be significant! Guardian provides rich, flexible plans that allow you to safeguard your health while saving you money. Review your plan options and see why vision insurance may be a great benefit for you.

Significant out-of-pocket savings available with your **Full Feature** plan by visiting one of Davis Vision's network locations including retail centers such as Wal-Mart[®], JCPenney[®], Sears[®], Target[®], Sam's Club[®], and Pearle[®].

Your Vision Plan	Full Feature - Designer
Your Network is	Davis Vision
Your premium	\$ 1.95
You and 1 dependent	\$ 2.97
You, spouse and child(ren)	\$ 5.20

Copay	
Exams Copay	\$ 10
Materials Copay (waived for non-formulary elective contact lenses)	\$ 25

Sample of Covered Services	<i>You pay (after copay if applicable):</i>	
	<i>In-network</i>	<i>Out-of-network</i>
Eye Exams	\$0	Amount over \$46
Single Vision Lenses	\$0	Amount over \$47
Lined Bifocal Lenses	\$0	Amount over \$66
Lined Trifocal Lenses	\$0	Amount over \$85
Lenticular Lenses	\$0	Amount over \$125
Frames	Amount over \$135	Amount over \$47
Contact Lenses (Elective and conventional)	Amount over \$135	Amount over \$105
Contact Lenses (Planned replacement and disposable)	Amount over \$135	Amount over \$105
Contact Lenses (Medically Necessary)	\$0	Amount over \$210
Cosmetic Extras	Avg. 40-60% off retail price	No discounts
Glasses (Additional pair of frames and lenses)	Courtesy discount from most providers	No discounts
Laser Correction Surgery Discount	Up to 25% off the usual charge or 5% off promotional price	No discounts

Service Frequencies	
Exams	Every 24 months
Lenses (for glasses or contact lenses)‡‡	Every 24 months
Frames	Every 24 months
Network discounts (cosmetic extras, glasses and contact lenses.)	Applies to first purchase & courtesy discount from most providers on subsequent purchases.

Dependent Age Limits	20/26
(Non-Student/ Student)	

‡‡Benefit includes coverage for glasses or contact lenses, not both.