

VISION BENEFITS ENROLLMENT GUIDE

Delta Dental, in partnership with EyeMed,
brings you **DeltaVision**® – flexible,
affordable vision insurance.



Why You Need Vision Insurance

Vision disorders are the second most prevalent health condition in the U.S., yet healthy vision couldn't be more important. That's why Delta Dental of Wisconsin is happy to bring you vision benefits that offer more flexibility, choice, and savings – so that it's easy for you to access the vision care and services you need.



Protect your budget

You can save 70 percent or more off retail pricing by using vision benefits.



Protect your health

Nearly 30 million people require vision correction yet don't use glasses or contacts.



Protect your family

Up to 25 percent of school-age children may have vision problems. Children need to see well to learn well.

Immediate savings

See how much you'd pay without vision insurance for an exam and eyeglasses**... and how much you can save (based on a plan with a \$130 frame allowance with 20% off balance of frames, and \$0 exam/copayment).

Service/Material	Average Retail Cost	DeltaVision Covers	Member Out-of-Pocket Costs
Exams*	\$84	\$84	\$0
Frames (\$130 allowance with 20% off balance of frames)	\$158	\$130 + \$5.60	\$22.40
Eyeglass Lenses Single-Vision**	\$79	\$79	\$0
Lens Options – UV Coating	\$14	\$0	\$14
Standard Scratch Resistance	\$21	\$6	\$15
Anti-Reflective Coating	\$87	\$42	\$45
TOTAL	\$443	\$346.60	\$96.40

**Not all plans include exam coverage. Refer to Your Vision Benefits to see if your plan includes exam coverage. Other plan designs or options may produce different out-of-pocket amounts.*

***Contact lenses may be selected in lieu of eyeglass lenses.*

Vision Savings Example

The difference vision insurance can make:

Kate and Jack

Here is an example of how DeltaVision insurance can save you money.

Kate has vision insurance through DeltaVision. She recently visited her ophthalmologist for her annual eye exam and chose a new pair of scratch-resistant eyeglasses. Using the chart shown on the previous page, Kate paid approximately \$38.

Unfortunately, Jack doesn't have vision insurance. He also visited his ophthalmologist for an annual eye exam and needed new eyeglasses. He had to pay \$342 out-of-pocket.

Kate's out-of-pocket costs:

\$38

Jack's out-of-pocket costs:

\$342



How DeltaVision Provides You Value

Save hundreds of dollars on frames, lenses, and lens options.

Through our partnership with EyeMed, DeltaVision can help you and your family save money and maintain good vision. DeltaVision's coverage for contact lenses and glasses, and discounts for services like laser vision correction, help you take care of your eyesight for less.

With easy enrollment and plenty of provider choices, DeltaVision delivers the best value in vision care – when you want it and where you want it – from a respected leader in vision benefit plans.

DID YOU KNOW?

We offer two of the largest vision networks in the nation, and:

- Thousands of independent providers, top optical retailers, and online options.
- A U.S.-based call center with the industry's longest customer service hours
- Choice of any brand of frames



Greater convenience

With a mix of independent providers, national retail chains, and online options, DeltaVision members have the greatest night and weekend access of any vision plan.



Bigger savings

Even after you receive your savings on your first pair of corrective eyewear, you can still save 40 percent off a second pair of glasses, 15 percent off contact lenses, and 20 percent off all products that the plan doesn't cover.



Freedom of choice

DeltaVision members can select from any frame option in the store, any lens, or any contact lens without limitations.

Save at thousands of providers nationwide including:



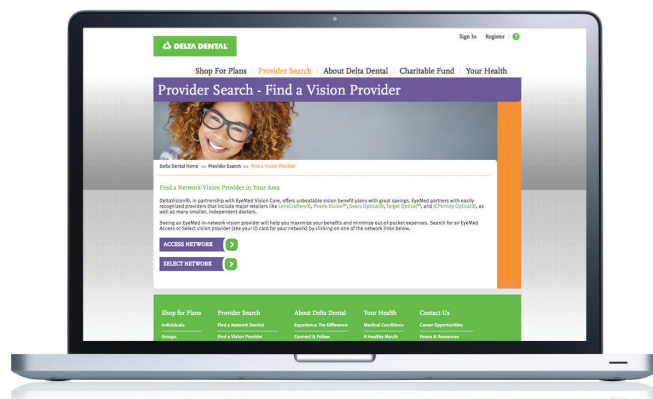
Finding a Network Vision Provider

We're proud to work with EyeMed® Vision Care as the network provider for Delta Dental members who are enrolled in either a DeltaVision® plan or in Delta Dental's vision discount program.

The EyeMed Access and Select networks supporting our members are among the nation's largest provider networks, featuring popular retail chains like LensCrafters®, Pearle Vision®, JCPenney Optical®, Sears Optical®, Target Optical®, Shopko Optical® Centers, and others. There are many small independent doctors included as well.

on the web

- Go to www.deltadentalwi.com and select "Find A Vision Provider" from the "Provider Search" tab.
- Click on the purple Access or Select network links to find an EyeMed in-network provider. Your provider network will be listed on your ID card.
- Enter your ZIP code on the EyeMed Provider Locator screen, then click "Get Results".
- Providers in your network will appear sorted by distance from your ZIP code. You can further narrow your search by using the Filter Search Results options.



by phone

You can also receive provider information by calling EyeMed's award winning, U.S.-based Customer Care Center at **844-848-7090**.

Your provider network (Access or Select) will be listed on your ID card.

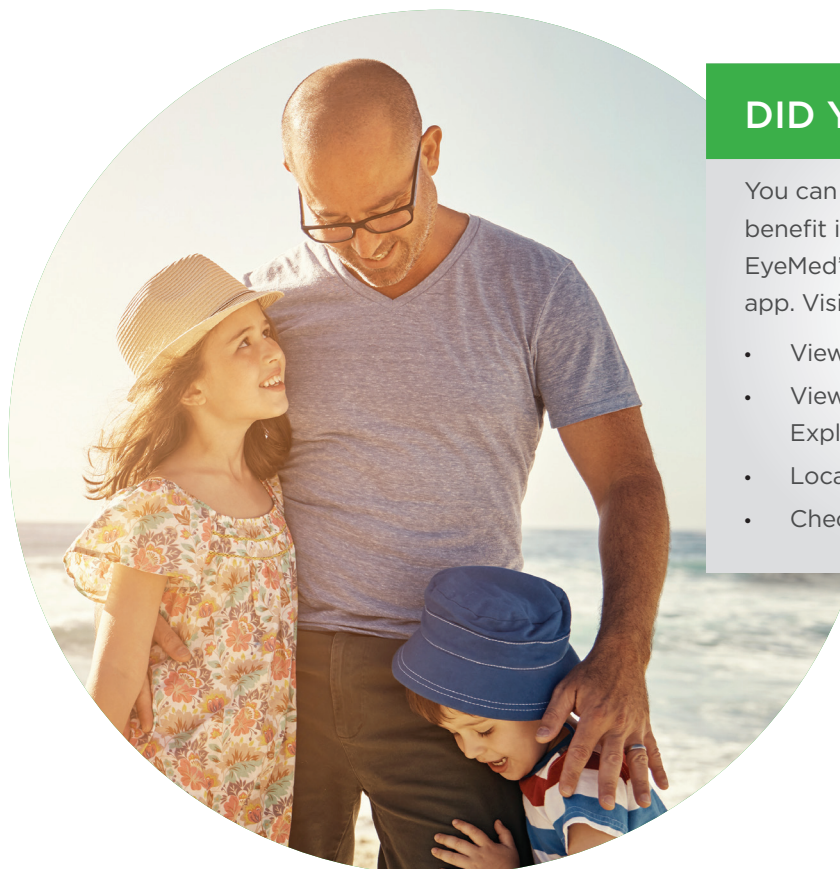
mobile app

EyeMed's free mobile app is available for iOS devices. Log in to iTunes or the App Store and search for "EyeMed Members". Use the secure app to access:

- Network providers (including driving directions to their location)
- Electronic ID card
- Current in-network benefits and eligibility
- EyeMed FAQs

Start Saving With DeltaVision

Focus on the importance of vision benefits.



DID YOU KNOW?

You can access your vision benefit information 24/7 via EyeMed's website and mobile app. Visit eyemed.com to:

- View benefits
- View/print your Explanation of Benefits
- Locate a provider
- Check claim status



How do I contact a benefit advisor?

Call our dedicated phone number at **844-848-7090**
Monday - Saturday
6:30 a.m. - 10 p.m. (CST),
Sunday 10 a.m. - 7 p.m.



When will I receive my ID card?

We try to mail benefit cards within a week of receiving enrollment paperwork (but the card is not required to receive benefits). You may also view your ID card on EyeMed's website or app.



Are there any waiting periods?

Unless otherwise specified, there are no waiting periods before you can obtain benefits.

DeltaVision® FULL PLAN

Network	Access
Benefit Plan	H
Frame/Contact Allowance	\$150/\$150
Copay (exams/standard plastic lenses)	\$10/\$10
Frequency (exams/lenses or contacts/frames); <i>(Based on last date of service, not calendar year)</i>	12/12/24
Dependent Age Limit	To age 26

BENEFIT DETAILS

	Network Benefit	Non-Network Reimbursement
Comprehensive Spectacle Exam	Member pays copay, plan pays balance	\$35
Retinal Imaging	Member pays up to \$39	None
Standard Contact Lens* Fit and Follow-Up	Member Pays up to \$55	None
Premium Contact Lens** Fit and Follow-Up	10% off retail price	None
Frames <i>(any available frame at provider location)</i>	Plan pays frame allowance, then 20% off balance	50% of the selected in-network allowance
Laser Vision Correction - Lasik or PRK	15% off retail price or 5% off promotional price	None
Diabetic Eye Care Benefits included that provide an additional office visit and diagnostic testing for those who have diabetes.		
Standard Plastic Lenses		
Single Vision	Member pays copay, plan pays balance	\$25
Bifocal	Member pays copay, plan pays balance	\$40
Trifocal	Member pays copay, plan pays balance	\$55
Standard Progressive	Member pays \$65 plus copay, plan pays balance	\$40
Lens Options		
UV Coating	Member Pays \$15	None
Tint <i>(solid & gradient)</i>	Member Pays \$15	None
Standard Scratch Resistance	Member Pays \$15	None
Standard Polycarbonate	Member Pays \$40	None
Standard Anti-Reflective Coating	Member Pays \$45	None
Other Add-Ons and Services	20% off Retail Price	None
Contact Lenses - In lieu of spectacles <i>(Contact lens allowance covers materials only)</i>		
Conventional	Plan pays contact allowance, then 15% off balance	80% of the selected allowance amount for contacts
Disposable	Plan pays contact allowance	80% of the selected allowance amount for contacts
Medically Necessary***	Paid in full	\$200

*Lenses that are spherical power only, soft lens materials, including planned replacement and conventional lenses. Lenses are to be used in a daily wear (removed prior to sleep) mode only.

**Includes all lens powers and designs other than spherical powers (i.e. toric, multifocal, etc.), modes of wear that are extended or overnight schedules and rigid or gas-permeable materials.

***Medically necessary contacts require authorization from a vision doctor when some conditions are present. Please contact the plan for more information.

This is not a complete description of benefits, exclusions, or limitations.

Additional In-Network Discounts

- 20% discount on items not covered by the plan at network providers. This discount may not be combined with any other discounts or promotional offers. This discount does not apply to an EyeMed® provider's professional services (i.e. exams) or contact lenses. Retail prices may vary by location.
- 40% discount on complete eyeglass purchases after your plan benefits have been fully used (includes prescription sunglasses).
- 15% discount on conventional contact lenses after your plan benefits have been fully used.
- Members can purchase eyeglasses online and apply their in-network eyeglass benefits at www.glasses.com.
- Members can purchase contact lenses online and apply their in-network contact benefits at www.contactsdirect.com.
- Discounts do not apply for benefits provided by other group benefit plans.

How to Maximize Your DeltaVision Plan

- Use providers participating in your vision plan network; your benefit dollars will go farther at participating providers.
- Use your full benefit allowance. Frames and lenses (plastic or contact) each have an annual benefit allowance; the benefit allowance must be used on a single purchase day.
- Frequency of benefits: your benefit frequency is based on the date of service. For example, you'll be covered for another eye exam 12 months after your last eye exam.
- Participating providers may offer promotional pricing on vision materials. You can partake in either the DeltaVision Network Benefit or the promotional price available, but not both. Your provider can help you to determine which is best for you. If you select the promotional pricing you can submit your expenses for Non-Network Reimbursement.
- Prescription sunglasses can be purchased with your benefit allowance for frames and plastic lenses.
- A 20% discount may be available on selected brands of non-prescription sunglasses from participating providers - ask your vision provider.
- Your vision benefits include both a frame allowance and a lens allowance. The lens allowance will cover either eye glass lenses or contact lenses. If you purchase both glasses and contacts, you will be responsible for the cost of either the eye glass lens or the contacts, depending upon which was purchased first. Your provider can assist you on making the best choice to maximize your vision benefit.
- Premium progressive lenses are more costly than standard progressive lenses. Please discuss your costs for progressive lenses with your vision provider.

Plan Limitations/Exclusions

- Orthoptic or vision training, subnormal vision aids, and associated supplemental testing.
- Medical and/or surgical treatment of the eye, eyes or supporting structures.
- Corrective eyewear required by an employer as a condition of employment, and safety eyewear unless specifically covered under the plan.
- Services provided as a result of any worker's compensation law.
- Plano nonprescription lenses and nonprescription sunglasses (except for 20% discount).
- Aniseikonic lenses.
- Services or materials provided by any other group benefit providing vision care.
- Two pairs of glasses in lieu of bifocals.
- Allowances are one-time use benefits; there is no remaining balance if entire allowance is not used after initial purchase.
- Lost or broken materials are not covered.



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