

CITY OF MARIETTA

An In-Depth Look...

Vision Care Services	In-Network Member Benefits		Out-of-Network Reimbursement	
	Plan 962 - Base Plan	Plan 9229 - Buy Up Plan	Base Plan	Buy Up Plan
Eye Examination (includes dilation when professionally indicated)	Covered in full after \$10 copay		Up to \$35	Up to \$45
Materials Materials copay applies to frame or spectacle lenses, if applicable.	\$25 materials copay	\$15 materials copay		
Frame Allowance	Members receive a \$50 wholesale allowance*** \$100-\$150 retail value**	Members receive a \$65 wholesale allowance*** \$150-\$175 retail value**	Up to \$45	Up to \$75
Standard Spectacle Lenses				
Single Vision	Covered in full after materials copay		Up to \$25	Up to \$40
Bifocal	Covered in full after materials copay		Up to \$40	Up to \$60
Trifocal	Covered in full after materials copay		Up to \$50	Up to \$80
Lenticular	Covered in full after materials copay		Up to \$80	Up to \$80
Standard Progressive	Covered up to \$50 plus 20% off retail	\$55 copay	Up to \$45	Up to \$60
Premium Progressive		\$100 copay	N/A	N/A
Other Lens Options*				
Polycarbonate Lenses (Adult) Ultraviolet Coating Scratch Resistant Coating Anti Reflective Coating Transitions®	Average savings of 20% off the provider's usual and customary fees	\$40 copay \$17 copay \$17 copay \$45 copay \$70 copay	N/A	
Contact Lenses**** (in lieu of frame and spectacle lenses)				
Elective	\$130 allowance	\$150 allowance	Up to \$130	Up to \$150
Medically Necessary	Covered in full	Covered in full	Up to \$250	Up to \$250
Refractive Laser Surgery	\$150 onetime/lifetime allowance	\$300 onetime/lifetime allowance	\$150 onetime/lifetime allowance	\$300 onetime/lifetime allowance
Frequency				
Eye Examination	Once every 12 months		Once every 12 months	
Lenses or contact lenses	Once every 12 months		Once every 12 months	
Frame	Once every 24 months		Once every 24 months	

* Discounts are not insured benefits

**** For Medically Necessary contact lenses, prior authorization is required.

Here's how it works...

When you need to see an eye care professional, simply visit www.avesis.com or contact Avēsis' Customer Service Monday through Friday, 7AM to 8PM (EST) at 1-800-828-9341 to receive a listing of providers in your area.

Rates Per Month - 962

Employee	\$6.24
EE + Spouse	\$10.91
EE + Child(ren)	\$13.10
EE + Family	\$16.22

Rates Per Month - 9229

Employee	\$6.85
EE + Spouse	\$12.07
EE + Child(ren)	\$14.03
EE + Family	\$17.64

How can we help you?

Avēsis Website:
www.avesis.com

Customer Service:
1-800-828-9341
7AM - 8PM EST

LASIK Provider:
1-877-712-2010

** Values provided may be more or less depending on the provider's retail pricing.

*** Participating Walmart locations cover frames up to a \$68 retail value.

Using Out-of-Network Providers

Members who elect to use an out-of-network provider must pay the provider in full at the time of service and submit a claim to Avēsis for reimbursement. Reimbursement levels are in accordance with the out-of-network reimbursement schedule previously listed. Out-of-network benefits are subject to the same eligibility, availability, frequency of benefits, and limitation and exclusion provisions of the plan, and are in lieu of services provided by a participating Avēsis provider. Out-of-network claim forms can be obtained by contacting Avēsis' Customer Service Center, your group administrator or by visiting www.avesis.com.

Limitations and Exclusions

Some provisions, benefits, exclusions or limitations listed herein may vary depending on your state of residence.

Limitations:

This plan is designed to cover eye examinations and corrective eyewear. It is also designed to cover visual needs rather than cosmetic options. Should the member select options that are not covered under the plan, as shown in the schedule of benefits, the member will pay a discounted fee to the participating Avēsis provider. Benefits are payable only for services received while the group and individual member's coverage is in force.

Exclusions:

There are no benefits under the plan for professional services or materials connected with and arising from:

- 1) Orthoptics or vision training;
- 2) Subnormal vision aids and any supplemental testing, aniseikonic lenses;
- 3) Plano (non-prescription) lenses, sunglasses;
- 4) Two pair of glasses in lieu of bifocal lenses;
- 5) Any medical or surgical treatment of eye or supporting structures;
- 6) Replacement of lost or broken lenses, contact lenses or frames, except when the member is normally eligible for services;
- 7) Any eye examination or corrective eyewear required by an employer as a condition of employment and safety eyewear;
- 8) Services or materials provided as a result of Workers Compensation Law, or similar legislation, required by any governmental agency whether Federal, State or subdivision thereof.
- 9) Services or materials provided by any other group benefit plan providing vision care.

Refractive Surgery Vision Benefit Exclusions:

Benefits are not payable for any of the following:

- 1) Routine vision examinations or corrective vision materials, including corrective eyeglasses, fittings, lenses, frames or contact lenses; or
- 2) Medical or surgical procedures, services or treatments:
 - a. not specifically covered under this Rider;
 - b. provided free of charge in the absence of insurance
 - c. payable under any Workers' Compensation law, or similar statutory authority
 - d. payable under governmental plan or program whether Federal, state or subdivisions thereof.

Termination Provisions

Coverage will end on the earliest of: the date the policy ends, the date the employee's employment ends, or the date the employee is no longer eligible.

Notes and Disclaimers

The contact lens allowance may be used all at once or throughout the plan year as needed or may be applied toward contact lenses only, or both contact lenses and professional services (fitting fees). Refractive Laser Surgery is considered Refractive Surgery, an elective procedure, and may involve potential risks to patients. Avēsis is not responsible for the outcome of any refractive surgery.

Insured benefits are administered by Avēsis Third Party Administrators, Inc., Phoenix, AZ