

a vision proposal created for: date: effective date:



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OUR BACKGROUND

operational excellence & expertise

Since 1978, Avēsis has developed, administered, and refined vision care solutions in order to provide our clients with best-in-class products and services. We have decades of experience as a national administrator of essential benefits programs, giving us the unique experience and expertise to match exceptional providers and products with the people who need them.

Our members are teachers and firefighters, accountants and bus drivers. Our clients are small businesses, school systems, municipalities, and *your* clients. We serve commercial and governmental health plan sponsors, unions, and TPAs.

And as we rapidly approach the nine-million-member mark, everyone at Avēsis—from senior management through customer service—remains committed to delivering the best essential healthcare programs available.

Success in business hinges on the satisfaction of our members and partners. We strive to provide exceptional network access at more than 61,000 access points, rich benefit coverage, and quick, courteous, well-trained customer service and claims processing staff.

The result of this mission and philosophy is the delivery of cost-effective benefits, improved patient outcomes, and high plan and customer satisfaction rates among our clients and members





COMPREHENSIVE EYE EXAM

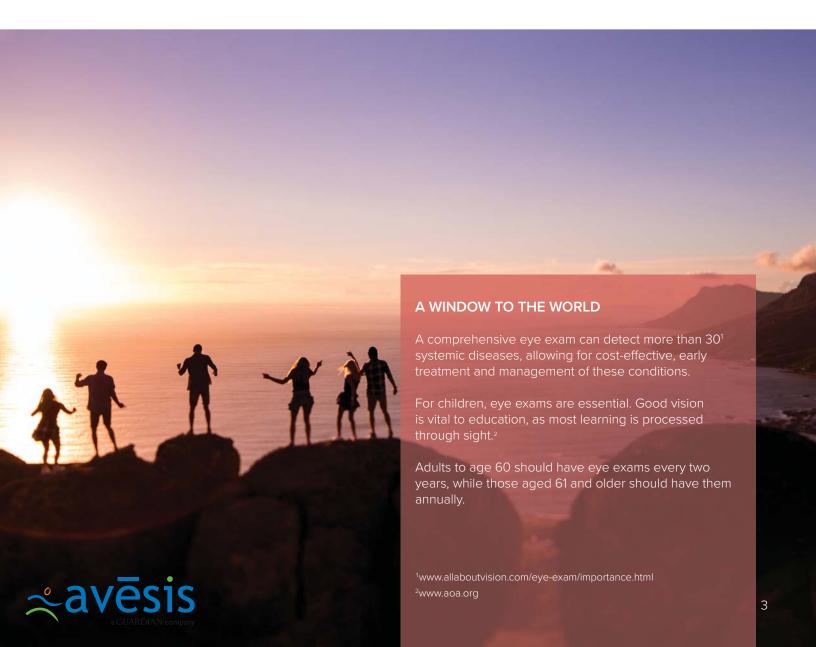
a look into your eyes

What easy, routine exam not only protects your vision but can detect other important medical conditions? An annual eye exam. And Avēsis members can get one from a well-credentialed Avēsis in-network provider for free or for the cost of a low copay.

HERE IS WHAT'S INCLUDED:

- Case history, including chief complaint and/or reason for visit
- Patient medical/eye health history and record of current medications
- Record of visual acuities with and without present correction, if applicable
- Pupil responses
- External exam
- Internal exam

- Screening of visual fields perception
- Current prescription
- Retinoscopy, when applicable
- Subjective refraction at far and near point
- Binocular and ocular mobility testing
- Test of accommodation and/or near point refraction
- Tonometry, when applicable
- Diagnosis/prognosis
- Specific recommendations



EYEGLASS BENEFIT

see what you're missing

FRAME BENEFIT

The Avēsis program is designed to give each member a frame that is covered in full. To take advantage of this benefit, members must stay within their plan allowance. A copay may apply.

However, Avēsis members are free to choose from *any* model of frame, by *any* designer, for *any* price. And if the price exceeds the plan allowance, members enjoy a reduced price on the remaining balance.

SPECTACLE LENSES

Our benefit for prescription lenses covers the necessary optical materials and professional services connected with eyewear ordering such as fabrication, fitting, and final adjustments.

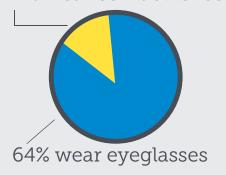
Once any materials copay is met, each member is entitled to a pair of standard single-vision, bifocal, trifocal, or lenticular lenses, covered in full. Lenses are available in plastic or glass (includes FDA hardening) FT25, FT28, RD22, and FT7 X 28, in all powers up to +/- 7.00SPH and 4.25 cylinder and up to +4.00D add.

Members may choose non-standard lenses or lens characteristics that are cosmetic and not necessary for their visual welfare. Specialized lens options (e.g. polycarbonate, high-index, scratch-coatings, etc.) are offered at Avēsis preferred pricing—minus the standard lens plan allowance. We also offer our clients a number of innovative lens options packages (details on page 10), with even greater out-of-pocket savings for our members.

75%
of adults
use some sort of vision correction

where

11% wear contact lenses





CONTACT LENS BENEFIT

seeing is believing

Members may choose elective contact lenses in lieu of the frame and spectacle lens benefits. They can use their allowance all at once or throughout the plan year, as needed. Those covered under our wholesale plans may use that allowance toward the contact lenses, the fitting fee, or both. (Copays do not apply to the elective contact lens benefit.) Those covered under our retail plans will use this allowance for the contact lenses, only. The contact lens fitting and follow-up (CLEFFU) is a separate benefit, and the extent of coverage is determined by the member's specific plan, as follows:

- Member's out-of-pocket maximum is \$50 standard and \$75 custom; members may use eyeglass benefit with their CLEFFU.
- Member's copayment is \$25 standard, \$50 custom;
 CLEFFU is in lieu of eyeglass benefit.
- Member has no copayment; CLEFFU is in lieu of eyeglass benefit.

MEDICALLY NECESSARY CONTACT LENSES

If contact lenses are medically necessary—such as in the case of cataract surgery, certain conditions of anisometropia or keratoconus, or to correct extreme visual conditions that can't be corrected with spectacle lenses—they are covered in full, and copays do not apply. Medically necessary contact lenses require prior authorization from Avēsis.

STANDARD VERSUS CUSTOM CONTACTS

Standard* and Custom* contact lens fittings both include:

- Prescribing the right material lens
- Ensuring the lens fits the patient's eyes—alignment, lens centration, corneal coverage, patient comfort, and stable visual acuity; custom contact lens fitting is typically lengthier and more complex due to material complexity and patient customization

*Daily wear, one-day replacement, two-week disposable, or monthly replacement lenses

[†]Toric, monovision, and multifocal lenses designed to meet the individual patient's need



AN EYE FOR VALUE

more savings

Once a member's benefits have been exhausted, vision care goods and services from a participating provider are available at Avēsis preferred pricing. The member is responsible for paying the provider at the time of service.

REFRACTIVE LASER SURGERY BENEFIT (LASIK)

Avēsis offers members a one-time/lifetime refractive laser surgery allowance, which can be used either in or out of network. Our national network of providers will discount their services before applying the allowance, and choosing one of them assures you of care from a qualified, experienced surgeon.

The discount for laser vision correction is based on the price points of participating surgeons. Members pay the surgeon's lowest advertised price, less the discount, less the allowance. That's how we ensure our members enjoy significant savings. Any remaining charges for refractive laser surgery benefits remain the responsibility of the member.

LASIK RIDER

As an elective option, Avēsis offers a funded refractive laser surgery rider in the amounts of \$300 or \$600 on a one-time/lifetime basis. Avēsis will apply the allowance toward the cost of surgery for one or both eyes. Any remaining charges are the responsibility of the member.

NOTE: Refractive surgery is an elective procedure and may involve potential risks to patients. Avēsis is not responsible for the outcome of any refractive surgery.



OUT-OF-NETWORK BENEFITS

see any provider

Avēsis Members get the most value when using an innetwork provider; however, our generous reimbursement allowance offers complete freedom of choice when it comes to exams, spectacle lenses and frames, contact lenses, or refractive laser surgery from providers who don't participate with our plan. Reimbursement for options such as tints, scratch coating, UV protection, and other cosmetic enhancements, is limited to those plans that include coverage for those lens options.

Members who seek these services outside the vast Avēsis network must pay the provider in full at the time of service and submit a claim to us for reimbursement, which is made in accordance with the plan-specified, out-of-network reimbursement schedule. (Members can download claims forms at www.avesis.com or contact their group's administrator or the Avēsis Customer Care Center. Copayments do not apply. Out-of-network benefits are subject to the same eligibility, availability, frequency, limitations, and exclusions of the plan and are in lieu of services provided by a participating Avēsis provider.)

LIMITATIONS & EXCLUSIONS

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

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

Under the Avēsis plan, no benefits are covered for professional services or materials connected with and arising from:

- Orthoptics or vision training
- Subnormal vision aids and any associated supplemental testing; aniseikonic lenses
- Plano (non-prescription) lenses or plano sunglasses
- Two pairs of glasses in lieu of bifocals and blended lenses
- Any medical or surgical treatment of the eyes or supporting structures
- Replacement of lost or broken lenses, contact lenses, or frames, except when the member is normally eliqible for services

- Services or materials provided by any other groups benefits plan providing vision care.
- Any eye examination or corrective eyewear required by an employer as a condition of employment
- Services or materials provided as a result of any Workers' Compensation law or similar legislation, required by any governmental agency whether federal, state, or subdivision thereof

Refractive Surgery Vision Benefit ExclusionsBenefits 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
- 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 any governmental plan or program whether Federal, state or subdivisions thereof.



GROUP IMPLEMENTATION

getting started with avesis



PROCESSING PAPERWORK

Plan setup begins once you submit a completed Group Application with the first month's premium (for group paid programs, only) to your sales representative. We must receive an original copy, or eligibility setup will be delayed.



GROUP DOCUMENTS

Once your Group Application and check have been received, we will prepare enrollment and group materials, including:

- Benefit Summaries
- HIPAA Privacy Notice
- Member Enrollment Forms
- Administrator's Guide

At this time during implementation, we'll assign an account manager who will be available to answer questions and support you throughout the contract.



COMPLETE ENROLLMENT

Once the group's initial enrollment is completed, hard copy enrollment forms must be sent to:

Avēsis

ATTN: Implementation Coordinator 10324 S. Dolfield Road Owings Mills, MD 21117

Groups submitting enrollment to Avēsis electronically must follow a specified data format to ensure seamless data transfer and integration. (For additional information on the Avēsis data format, please contact (410-413-9158.) Transferring electronic eligibility data to Avēsis can be done via:

- Email to: avesiscit@avesis.com
- Encrypted email
- FTF
- Postal mail using most modern storage devices

The best way to build a group's eligibility is participation in the Avēsis E-billing program. This system gives benefits administrators complete online access for enrollment, ongoing maintenance, and billing.



YOUR TAILORED PLAN DESIGNS

The plan below reflects the combination of in-network benefits we designed especially for you. But a wide range of options makes at least 300 plan designs possible, so we're guaranteed to build the perfect package for you.

EYE EXAMINATION

Your eye examination is covered in full, after the exam copay.

SPECTACLE LENSES

IN-NETWORK BENEFITS

Your standard single-vision, standard bifocal, standard trifocal and lenticular lenses are covered in full, after a materials copay. Members who choose specialty lenses will enjoy preferred pricing after their benefit amount is deducted, so the price difference will be discounted.

FRAME ALLOWANCE

Your frame allowance is based on your plan design below.

CONTACT LENS ALLOWANCE

Your contact lens allowance is based on the plan design selected below.*

'Contact lenses are in lieu of spectacle lenses and frame. Contact lenses and out-of-network benefits are not subject to copayment. Premium is subject to adjustment in the event of changes in benefits, contributions, the number of eligible employees, or any future additional tax, fee or assessment imposed by the Federal or State governments with associated administrative costs and expenses. Rates are good for 90 days from the date this proposal was created.

Employer Paid - Minimum group size and participation of 5 eligible employees. Voluntary Groups - Minimum group size and participation of 10 eligible employees. Policies and rates are guaranteed for 2 years.

PLAN NAME COPAY EXAM CONTACT LENS FIT FOLLOW-UP (STANDARD/CUSTOM) MATERIALS **FRAME** RETAIL ALLOWANCE WALMART/SAMS CLUB RETAIL VALUE **CONTACT LENS ALLOWANCE LENS OPTIONS*** PACKAGE **REFRACTIVE SURGERY ALLOWANCE PLAN DETAILS FREQUENCY** CONTRIBUTION **RATES**

CONTACT:

EO = Employee Only

E1 = Employee + One

ES = Employee + Spouse

EC = Employee + Child(ren)

EF = Employee + Family

avesis
a CUARDIAN COMPANY

Effective Date:



Our lens options packages include the most requested lens materials and enhancements (tints, coatings, and more)—so all our members can see clearly. They can be added easily to any plan and you're guaranteed to find a lens option package that's right for you! All of our standard plans include youth polycarbonate lenses.

	Lens Package 2	Lens Package 3	Lens Package 4	Lens Package 5	Lens Package 6	Lens Package 7
Adult Polycarbonate	√	√		✓		✓
Standard Scratch-Resistant Coating		√		1		✓
Ultra-Violet Screening		✓		✓		/
Solid or Gradient Tint		1		✓		✓
Standard Anti-Reflective Coating		1		1		✓
Level 1 Progressives			/	/	/	/
Level 2 Progressives					\	/

Options that are not included in your lens package above can be purchased at discounted Avēsis in-network preferred pricing below:

Adult Polycarbonate (Single Focus/Multi-Focal)	\$40/\$44
Standard Scratch-Resistant Coating	\$17
Ultra-Violet Screening	\$15
Solid or Gradient Coating	\$17
Standard Anti-Reflective Coating	\$45
Level 1 Progressives	\$75
Level 2 Progressives	\$110
Transitions® (Single Focus/Multi-Focal)	\$70/\$80
Polarized	\$75
PGX/PBX	\$40

- Our STANDARD package is up to 20% off retail
- Transitions® lenses can be added to any lens option package above:
 - "T" before the option number is covered in full
 - "TC" before the option number is covered with a \$40 copay

Underwritten by Fidelity Security Life Insurance Company, Kansas City, MO 64111 Policy #: VC-16, Form M-9059



Out-of-Network Benefits

Members maximize their benefits when choosing from one of Avesis' well-credentialed providers. However, members are free to select any vision provider for services. If you choose an out-of-network provider, the following benefit allowances are reimbursable to the member.

REIMBURSEMENTS AMOUNT UP TO				
EXAM				
CONTACT LENS FIT FOLLOW-UP (STANDARD/CUSTOM)				
LENSES AND FRAMES				
STANDARD SINGLE VISION				
STANDARD BIFOCAL				
STANDARD TRIFOCAL				
STANDARD LENTICULAR				
STANDARD PROGRESSIVE				
FRAME				
CONTACT LENS				
ELECTIVE CONTACT LENS				
MEDICALLY NECESSARY CONTACT LENS				
REFRACTIVE SURGERY	 			
LASIK				

