

# **Vision Benefit Summary**

### Group Number: 00533122

### 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.

**Option I:** Visit any doctor with your **Full Feature** plan, but save by visiting any of the 50,000+ locations in the nation's largest vision network, including Costco Optical, Visionworks, Clarkson Eyecare, Shopko Eyecare Center, Visioncare Associates, Rxoptical and more.

**Option 2:** 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<sup>®</sup>, JCPenney<sup>®</sup>, Sears<sup>®</sup>, Target<sup>®</sup>, Sam's Club<sup>®</sup>, Pearle<sup>®</sup>, and Visionworks<sup>®</sup>.

Your Vision Plan	Option 1: Full Feature		<b>Option 2: Full Feature - Designer</b>	
Your Network is	VSP Choice Network		Davis Vision	
Your Weekly premium	\$ 1.76		\$ 1.74	
You and spouse/domestic partner	\$ 2.97		\$ 2.92	
You and child(ren)	\$ 3.02		\$ 2.98	
You, spouse/domestic partner and child(ren)	\$ 4.78		\$ 4.72	
Сорау				
Exams Copay	\$ 20		\$ 20	
Materials Copay (waived for non-formulary elective contact lenses)	\$ 20		\$ 20	
Sample of Covered Services	You pay (after copay if applicable):		You pay (after copay if applicable):	
	In-network	Out-of-network	In-network	Out-of-network
Eye Exams	\$0	Amount over \$39	\$0	Amount over \$50
Single Vision Lenses	\$0	Amount over \$23	\$0	Amount over \$48
Lined Bifocal Lenses	\$0	Amount over \$37	\$0	Amount over \$67
Lined Trifocal Lenses	\$0	Amount over \$49	\$0	Amount over \$86
Lenticular Lenses	\$0	Amount over \$64	\$0	Amount over \$126
Frames	80% of amount over \$130'	Amount over \$46	80% of amount over \$130* <sup>2</sup>	Amount over \$48
Costco Frame Allowance	Amount over \$70		N/A	
Contact Lenses (Elective)	Amount over \$130	Amount over \$100	N/A	N/A
Contact Lenses (Elective and conventional)	N/A	N/A	85% of amount over \$130*	Amount over \$105
Contact Lenses (Planned replacement and disposable)	N/A	N/A	85% of amount over \$130*	Amount over \$105
Contact Lenses (Medically Necessary)	\$0	Amount over \$210	\$0	Amount over \$210
Contact Lenses (Evaluation and fitting)	Up to \$60	Not Applicable	No discounts	No discounts
Cosmetic Extras	Avg. 20-25% off retail price	No discounts	Avg. 40-60% off retail price	No discounts

Benefit information illustrated within this material reflects the plan covered by Guardian as of 09/17/2018 OPTIMAX SYSTEMS, INC. ALL ELIGIBLE EMPLOYEES Benefit Summary The Guardian Life Insurance Company of America, 7 Hanover Square, New York, NY 10004

Your Vision Plan	Option I: Full Feature	<b>Option 2: Full Feature - Designer</b>	
Glasses (Additional pair of frames and lenses)	20% off retail price** No discounts	Courtesy discount No discounts from most providers	
Laser Correction Surgery Discount	Up to 15% off the No discounts usual charge or 5% off promotional price	Up to 25% off the No discounts usual charge or 5% off promotional price	
Service Frequencies			
Exams	Every calendar year	Every calendar year	
Lenses (for glasses or contact lenses)‡‡	Every calendar year	Every calendar year	
Frames	Every calendar year	Every calendar year	
Network discounts (glasses and contact lens professional service)	Limitless within 12 months of exam.	Applies to first purchase & courtesy discount from most providers on subsequent purchases.	
Dependent Age Limits	26	26	
To Find a Provider:	Register at VSP.com to find a participating	Visit www.GuardianAnytime.com and click on	
	provider.	"Find a Provider"	

#### VSP

- ‡‡Benefit includes coverage for glasses or contact lenses, not both.
- \*\* For the discount to apply your purchase must be made within 12 months of the eye exam.
- Charges for an initial purchase can be used toward the material allowance. Any unused balance remaining after the initial purchase cannot be banked for future use. The only exception would be if a member purchases contact lenses from an out of network provider, members can use the balance towards additional contact lenses within the same benefit period.
- <sup>1</sup>Extra \$20 on select brands

#### Davis

- ‡‡Benefit includes coverage for glasses or contact lenses, not both.
- Contact lenses from Davis Vision's Collection are available at most private practice locations with Full Feature and Materials Only plans. Contacts from the collection are covered in full including fitting and evaluation, in excess of the plan's materials copay. Elective contacts that are not part of the Collection are covered up to the plan's elective contact lens allowance and the materials copay is waived.
- \*Due to lower prices available at Wal-mart and Sam's Club locations, discounts do not apply. Members will pay 100% of the amount over their allowance.
- For Davis Vision, complete eyeglasses must be purchased at one time from one provider. For example, if a member purchases only lenses, he or she cannot purchase frames later in the same benefit period. The member is not eligible for new vision materials until the next benefit period. Only charges for an initial purchase can be used toward the material allowance. Any unused balance remaining after the initial purchase cannot be banked for future use.
- <sup>2</sup>Extra \$50 at Visionworks stores

This document is a summary of the major features of the referenced insurance coverage. It is intended for illustrative purposes only and does not constitute a contract. The insurance plan documents, including the policy and certificate, comprise the contract for coverage. The full plan description, including the benefits and all terms, limitations and exclusions that apply will be contained in your insurance certificate. The plan documents are the final arbiter of coverage. Coverage terms may vary by state and actual sold plan. The premium amounts reflected in this summary are an approximation; if there is a discrepancy between this amount and the premium actually billed, the latter prevails.

### Manage Your Benefits:

Go to www.GuardianAnytime.com to access secure information about your Guardian benefits including access to an image of your ID Card. Your on-line account will be set up within 30 days after your plan effective date.

## **Need Assistance?**

Call the Guardian Helpline (888) 600-1600, weekdays, 8:00 AM to 8:30 PM, EST. Refer to your member ID (social security number) and your plan number: 00533122.

Please call the Guardian Helpline if you need to use your benefits within 30 days of plan effective date. Please note, self-serve options over the phone or online at Guardian Anytime are not available until the case is fully implemented, please wait to speak to a live agent when calling the Guardian Helpline.