



DIRECT VISION INSURANCE

No Waiting Periods

Choice of EyeMed
or VSP Networks

Underwritten by:



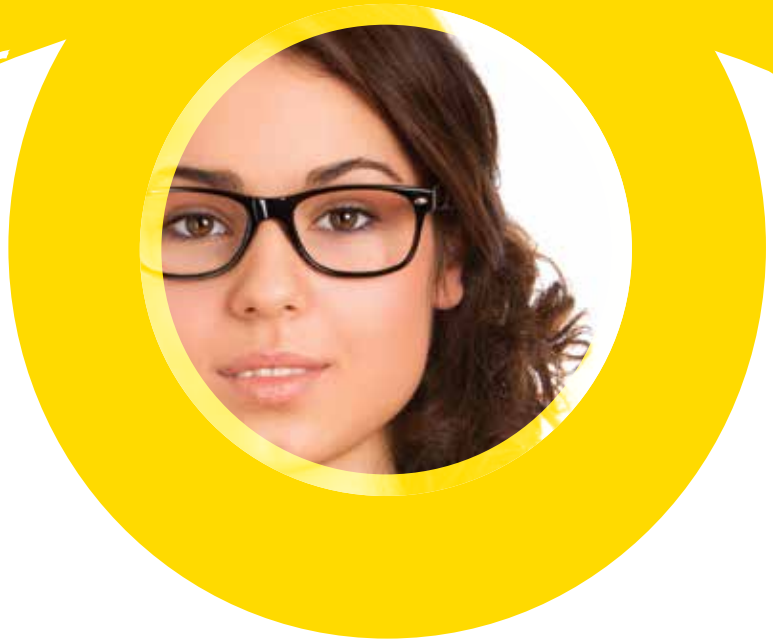
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DIRECT VISION INSURANCE



You'll like what you see with Direct Vision.

Protecting your eyes starts with having routine eye exams. With Direct Vision you'll be covered for one routine eye exam every 12 months – starting on day one of your coverage!

Choice of Providers

The Direct Vision Insurance plans include in-network and out-of-network benefits. Choose from EyeMed or VSP network plans. Why choose a network? When you use a network provider you maximize your benefits with low deductibles and overall lower out-of-pocket costs.

If you choose to see an out-of-network provider, these plans provide you with an allowance for each service and you are responsible for any costs above those amounts.



LENSCRAFTERS'



About EyeMed

EyeMed offers one of the largest vision networks in the nation with a mix of independent providers and retail chains. When you utilize an in-network provider, you will receive additional discounts such as:

- 20% off remaining frame balance
- 40% off non-covered complete prescription glasses
- Special pricing on lens upgrades such as UV coating & polycarbonate lenses & 20% off non-covered materials
- 15% average off retail price for LASIK or PRK laser vision correction, or 5% off promotional price, at US Laser Network locations

Based on applicable laws, reduced costs may vary by doctor location.

To search for providers, go to eyemed.com and select the Access Network or call **866-289-0614**

About VSP

VSP offers the nation's largest network of independent providers. Browse and buy online at eyeconic.com and get the most current deals on eyewear with network benefits.

- 20% off remaining frame balance
- 20% off non-covered complete prescription glasses
- 20-25% off non-covered lens options such as UV coating & polycarbonate lenses
- 15% average off retail for LASIK or PRK laser eye correction, or 5% off promotional price, through a VSP provider

Based on applicable laws, reduced costs may vary by doctor location.

To search for providers, go to vsp.com or call **800-877-7195**

EyeMed – Choose from two plans.

EYEMED ACCESS PLAN A

- Eye Exams** focus on your eye health and overall wellness
- \$15 deductible every 12 months
- Contact Lens Exam & Fitting**
Standard contact lens exam and fitting
- \$15 deductible every 12 months
- Frames**
- Up to \$150 frame allowance every 12 months
- Contacts** (in lieu of lenses and frames)
- Up to \$150 allowance every 12 months
- Single/Bifocal/Trifocal or Lenticular Lenses**
- \$25 deductible every 12 months

EYEMED ACCESS PLAN B

- Eye Exams** focus on your eye health and overall wellness
- \$15 deductible every 12 months
- Contact Lens Exam & Fitting**
Standard contact lens exam and fitting
- \$15 deductible every 24 months
- Frames**
- Up to \$150 frame allowance every 24 months
- Contacts** (in lieu of lenses and frames)
- Up to \$150 allowance every 24 months
- Single/Bifocal/Trifocal or Lenticular Lenses**
- \$25 deductible every 24 months

EYEMED DIRECT VISION RATES

	EyeMed Access Plan A	EyeMed Access Plan B
Individual	\$15.02	\$11.53
Individual +1	\$27.64	\$21.22
Family	\$41.31	\$31.71

EYEMED DIRECT VISION RATES - FL, MN, MS

	EyeMed Access Plan A	EyeMed Access Plan B
Individual	\$12.02	\$9.22
Individual +1	\$22.11	\$16.98
Family	\$33.05	\$25.37

Lenses and frames.

- Standard plastic single, bifocal, trifocal or lenticular lenses coverage with discounts available on additional lens options.
- 40% off unlimited additional eyeglasses after initial benefit is exhausted.
- Receive 20% discount on remaining frame balance (once allowance has been applied) and 15% discount on any balance over the conventional contact lens allowance.

Glasses.com and contactsdirect.com.

Members can use **Glasses.com** and **contactsdirect.com** as an in-network option to purchase frames and contacts.

For glasses:

- Simply send a picture of the prescription. Lenses are available for most prescriptions, including progressives and multifocals.
- Orders are fulfilled and shipped free the following day.
- Once received if you need an adjustment visit any LensCrafters.

For contacts:

- Select your lenses from a wide selection of top selling brands.
- Contacts will ship as soon as the prescription is verified – most that same day – and for free.

Additional benefits at no additional cost.*

- 5-15% savings on LASIK or PRK services through the US Laser Network.

Out-of-network benefits.

Direct Vision also offers out-of-network benefits. Members will realize the biggest benefit savings when they utilize an in-network provider, but our plans reflect the understanding that it is not always possible. When an out-of-network provider is utilized, the member pays the provider the appropriate fees and then requests reimbursement from the plan. The plan will reimburse up to the amounts indicated in the schedule to the right.

ADDITIONAL STANDARD LENS ENHANCEMENTS (Member Cost)	SINGLE VISION	MULTIFOCAL VISION
UV Protection Coating	\$15	\$15
Glass Tints	\$15	\$15
Solid Plastic Dye	\$15	\$15
Plastic Gradient Dye	\$15	\$15
Standard Scratch-Resistance	\$15	\$15
Standard Polycarbonate Lens	\$40	\$40
Anti-Reflective Coating	\$45	\$45
Photochromic Lens - Plastic	Retail Discount	Retail Discount
Standard Progressive	\$65	\$65
Other Add-Ons and Services	Retail Discount	Retail Discount

MAXIMUM ALLOWANCE OUT-OF-NETWORK

Exams	\$50
Frames	\$70
Single Vision Lens	\$50
Bifocal Lens	\$75
Progressive Lens	\$75
Trifocal Lens	\$100
Elective Contact Lenses	\$105
Medically Necessary Contact Lenses	\$250

* These additional discounts and value-added features are not a part of the insurance plan and there is no affiliation or ownership between Ameritas and these programs. Based on applicable laws, reduced costs may vary by doctor location.

The EyeMed Direct Vision Insurance plans are available in all states except: MA, MD, MT, NY, OH, RI, WA and PA counties of Forest, Huntingdon, Montour, and Sullivan. EyeMed Plan B is not available in NM.

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VISION LIMITATIONS AND EXCLUSIONS

What is not covered?

Covered expenses will not include and no benefits will be payable for:

- Vision examinations, lenses and frames more than the frequency as indicated on the plan summary page.
- Orthoptics or vision training and any associated supplemental testing.
- Plano lenses (lenses with refractive correction of less than plus or minus .50 diopter) except as specifically allowed in the frames benefit section of the Plan Benefits.
- Two pairs of glasses in lieu of bifocals.
- Replacement of spectacle lenses, frames, and/or contact lenses furnished under this plan that are lost or damaged, except at the normal intervals when services are otherwise available.
- Medical or surgical treatment of the eyes.
- A service which is not listed under the Schedule of Eye Care Services found in the certificate. Members pay costs exceeding plan benefits.

WHEN WILL MY COVERAGE BEGIN

When you enroll online your coverage can start as soon as the next day. Choose the date that works best for you and your family. You will receive an email confirmation immediately after enrollment to verify this information. Your policy will arrive within 10 business days of enrollment.

IMPORTANT NOTICE: Your enrollment will take 2-3 business days before it becomes accessible in the EyeMed or VSP provider systems. If you have an appointment within several days of your effective date and your provider indicates you are not yet in their system, please call customer service for assistance. Representatives are available Monday-Friday at 800.300.9566.

Plan includes a one-time non-refundable enrollment fee of \$25. This charge will be made at the time of purchase and may appear as a separate transaction from your vision insurance.

VSP – Choose from two plans.

VSP CHOICE PLAN A

- Eye Exams** focus on your eye health and overall wellness
- \$15 deductible every 12 months
- Contact Lens Exam & Fitting**
- Standard contact lens exam and fitting
- \$60 deductible every 12 months
- Frames**
- \$25 deductible (combined for frames & lenses)
 - Up to \$150 frame allowance every 12 months
- Contacts** (in lieu of lenses and frames)
- Up to \$150 allowance every 12 months
- Single/Bifocal/Trifocal or Lenticular Lenses**
- \$25 deductible (combined for frames & lenses) every 12 months

VSP CHOICE PLAN B

- Eye Exams** focus on your eye health and overall wellness
- \$15 deductible every 12 months
- Contact Lens Exam & Fitting**
- Standard contact lens exam and fitting
- \$60 deductible every 24 months
- Frames**
- \$25 deductible (combined for frames & lenses)
 - Up to \$150 frame allowance every 24 months
- Contacts** (in lieu of lenses and frames)
- Up to \$150 allowance every 24 months
- Single/Bifocal/Trifocal or Lenticular Lenses**
- \$25 deductible (combined for frames & lenses) every 24 months

VSP DIRECT VISION RATES

	VSP Choice Plan A	VSP Choice Plan B
Individual	\$15.97	\$12.22
Individual +1	\$29.38	\$22.48
Family	\$43.91	\$33.60

VSP DIRECT VISION RATES - FL, MN, MS

	VSP Choice Plan A	VSP Choice Plan B
Individual	\$12.78	\$9.78
Individual +1	\$23.50	\$17.98
Family	\$35.13	\$26.88

Frames, glasses and sunglasses.

- Receive 20% savings on frames over the frame allowance.
- Select a featured frame brand and receive an extra \$20 on the frame allowance.
- Savings of 20% on additional glasses and sunglasses.

Lens enhancements.

- Member Cost for Lens Enhancements applies to single and multifocal vision lens enhancements with the exception of glass tints (\$44) and polycarbonate (\$35) which have higher multifocal member cost.

Additional benefits at no additional cost.*

Laser VisionCare ProgramSM

- Contracted laser centers provide discounts averaging 15% off laser surgery, including photorefractive keratectomy (PRK), laser-assisted in-situ keratomileusis (LASIK) and Custom LASIK.
- If the laser center is offering a price reduction, you'll receive an additional 5% off the promotional price.

Low Vision

- Low vision is vision loss sufficient enough to prevent reading and performing daily activities. With pre-approval from VSP, low vision supplemental testing and low vision aids up to \$1,000 are covered every 2 years.

Out-of-network benefits.

Direct Vision also offers out-of-network benefits. Members will realize the biggest benefit savings when they utilize an in-network provider, but our plans reflect the understanding that it is not always possible. When an out-of-network provider is utilized, the member pays the provider the appropriate fees and then requests reimbursement from the plan. The plan will reimburse up to the amounts indicated in the schedule to the right.

*These additional discounts and value-added features are not a part of the insurance plan and there is no affiliation or ownership between Ameritas and these programs. Based on applicable laws, reduced costs may vary by doctor location.

**Member cost for Progressive Lenses varies. The VSP Provider will be able to provide the amount of the patient responsibility.

The VSP Direct Vision Insurance plans are available in all states except: MA, MD, MT, NY, RI and WA. Plan A is not available in OH. VSP Plan B is not available in NM.

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ADDITIONAL STANDARD LENS ENHANCEMENTS (Member Cost)	SINGLE VISION	MULTIFOCAL VISION
UV Protection Coating	\$16	\$16
Glass Tints Solid and Dyes (Except Pink I & II)	\$34	\$44
Solid Plastic Dye (Except Pink I & II)	\$15	\$15
Plastic Gradient Dye	\$17	\$17
Factory Applied Standard Scratch-Resistance Coating	\$17	\$17
Polycarbonate Lens	\$31	\$35
Anti-Reflective Coating	\$41	\$41
Photochromic Lens - Plastic	\$70	\$82
Standard Progressive	N/A	**Varies
Other Add-Ons and Services	Available at Discount	Available at Discount

MAXIMUM ALLOWANCE OUT-OF-NETWORK

Exams	\$45
Frames	\$70
Single Vision Lens	\$30
Bifocal Lens	\$50
Progressive Lens	\$50
Trifocal Lens	\$65
Lenticular Lens	\$100
Elective Contact Lenses	\$105
Medically Necessary Contact Lenses	\$210



VISION LIMITATIONS AND EXCLUSIONS

What is not covered?

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- Vision examinations, lenses and frames more than the frequency as indicated on the plan summary page.
- Orthoptics or vision training and any associated supplemental testing.
- Plano lenses (lenses with refractive correction of less than plus or minus .50 diopter) except as specifically allowed in the frames benefit section of the Plan Benefits.
- Two pairs of glasses in lieu of bifocals.
- Replacement of spectacle lenses, frames, and/or contact lenses furnished under this plan that are lost or damaged, except at the normal intervals when services are otherwise available.
- Medical or surgical treatment of the eyes.
- A service which is not listed under the Schedule of Eye Care Services found in the certificate. Members pay costs exceeding plan benefits.

WHEN WILL MY COVERAGE BEGIN

When you enroll online your coverage can start as soon as the next day. Choose the date that works best for you and your family. You will receive an email confirmation immediately after enrollment to verify this information. Your policy will arrive within 10 business days of enrollment.

IMPORTANT NOTICE: Your enrollment will take 2-3 business days before it becomes accessible in the EyeMed or VSP provider systems. If you have an appointment within several days of your effective date and your provider indicates you are not yet in their system, please call customer service for assistance. Representatives are available Monday-Friday at 800.300.9566.

Plan includes a one-time non-refundable enrollment fee of \$25. This charge will be made at the time of purchase and may appear as a separate transaction from your vision insurance.

Frequently Asked Questions for Direct Vision Insurance Members.

Who is eligible for this plan?

The insurance coverage is available in states where it's approved to anyone age 18 and older who does not have coverage through another Ameritas vision plan. You can request coverage for your dependents; dependent eligibility varies based on state law.

How quickly can I start my coverage?

When you enroll online your coverage can start as soon as the next day. Choose the date that works best for you and your family. You will receive an email confirmation immediately following your enrollment to verify this information. Your policy will arrive within 10 business days of enrollment.

IMPORTANT NOTICE: Your enrollment may take 2-3 business days before it becomes accessible to the EyeMed or VSP provider. If you have an appointment within several days of your effective date and your provider indicates you are not yet in their system, please call customer service for assistance. Representatives are available Monday – Friday at **800.300.9566**.

What if I change my mind about the coverage shortly after enrolling?

Direct Vision Insurance comes with a 30-day Customer Satisfaction Guarantee. You have 30 days after your plan becomes effective to cancel your plan if you are not satisfied for any reason. Any premium paid, minus the enrollment fee, will be fully refunded provided no covered services have been rendered.* If services have been provided, you may still cancel your policy however the premium paid will not be eligible for reimbursement.

* Plan includes a one-time non-refundable enrollment fee of \$25. This charge will be made at the time of purchase and may appear as a separate transaction from your vision insurance.

Will I receive an ID Card?

- Yes, you will receive an ID card.

Where can I go to find a vision provider?

- Find EyeMed providers at **EyeMed.com** (choose the Access Network) or call **866.289.0614**
- Find VSP providers at **VSP.com** (choose the Choice Network) or call **800.877.7195**

Who should I contact regarding a claim?

- For questions regarding a claim contact EyeMed at **866.289.0614**.
- For questions regarding a claim, contact VSP at **800.877.7195**.

What can you tell me about Ameritas, the insurance company underwriting this plan?

Ameritas Life Insurance Corp. and its affiliated companies have a proud and rich heritage dating back to the late 1880s. This tradition is deeply rooted in our commitment to our customers, a foundation of integrity and trust and a legacy of financial strength to deliver on our promises.

About the Direct Benefits Insurance Team

Direct Vision Insurance is available exclusively through Direct Benefits, Inc.

Direct Benefits, Inc. is a managing general agency that provides one-stop employee benefits to over 15,000 independent agents, brokers, consultants and general agents in all 50 states.

We're in it for the little people of America. Our mission is to provide individuals and small businesses with the same or better quality insurance products as Fortune 500 companies. By partnering with financially strong insurance carriers like Ameritas, we are able to create exclusive niche products like Direct Vision Insurance.



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