# **Onondaga County**

# Welcome to Davis Vision!

We are pleased to provide you with information on your vision benefit to help you care for your vision and eye health - a key part of overall health and wellness!

If you are not currently enrolled, please visit our member site at davisvision.com or call 1.877.923.2847 and enter client code 4464 to locate providers or for additional information.



Using your benefits is easy! Just log

on to our Member site at davisvision.com and click "Find a Provider," or call us at 1.800.999.5431.

Make an appointment. Tell your provider you are a Davis Vision member with coverage through Onondaga County. Provide your member ID number, name and date of birth, and do the same for your covered dependents seeking vision services. Your provider will take care of the rest!

# Your Davis Vision Premier Plan Benefits

**100% OF YOUR CALLS & CLAIMS ARE** PROUDLY ADMINISTERED IN THE USA \*\*\*

Member Price

Benefit	Frequency Once every -	In-network Copay	In-network Coverage	
Eye Examination <sup>/4</sup>	12 months	\$0	Covered in full. Includes dilation when professionally indicated.	
Spectacle Lenses	12 months	\$10	Clear plastic lenses in any single vision, bifocal, trifocal or lenticular prescription. Covered in full. (See below for additional lens options and coatings.)	
Frame	12 months	\$0	Covered in Full Frames: OR, Frame Allowance:	Any Fashion, Designer or Premier level frame from Davis Vision's Collection <sup>/2</sup> (retail value, up to \$195). \$120 toward any frame from provider plus 20% off any balance. <sup>/1</sup> No copay required.
Contact Lens Evaluation, Fitting & Follow Up Care	12 months	\$0	Davis Vision Collection Contacts: Standard, Soft Contacts: Specialty Contacts/3:	Covered in full. 15% off balance <sup>/1</sup> . 15% off balance <sup>/1</sup> .
<b>Contact Lenses</b> (in lieu of eyeglasses)	12 months	\$10	Covered in Full Contacts: Planned Replacement Disposable OR, Contact Lens Allowance:	From Davis Vision's Collection <sup>/2</sup> , after copay, up to: Two boxes/multi-packs* Four boxes/multi-packs* \$120 allowance toward any contacts from provider's supply plus 15% off balance. <sup>/1</sup> No copay required.
			OR, Visually Required Contacts:	Covered in full with prior approval. *Number of contact lens boxes may vary based on manufacturer's packaging.
Safety Eyeglasses (Members Only)	12 months	\$10	Covered in Full Safety Frames:	Any Fashion, Designer or Premier level frame from Davis Vision's Safety Collection <sup>/5</sup> .

Significant savings on optional frames, lens types and coatings!

	Dress	Safety	
Davis Vision Collection Frames: Fashion   Designer   Premier	\$0   \$0   \$0	\$0   \$0   \$0	
Tinting of Plastic Lenses	\$0	\$0	
Tinting of Plastic Lenses Scratch-Resistant Coating	\$0	\$0	
Premium Scratch-Resistant Coating Ultraviolet Coating	\$30	\$30	
Ultraviolet Coating	\$0	\$0	
Anti-Reflective Coating: Standard   Premium   Ultra   Ultimate	\$33   \$48   \$60   \$85	\$33   \$48   \$60   \$85	
Polycarbonate Lenses High-Index Lenses: 1.67   1.74 Blended Lenses	\$0	\$0 <sup>/6</sup>	
High-Index Lenses: 1.67   1.74	\$55   \$120	\$55   \$120	
Blended Lenses	\$0	\$0	
Progressive Lenses: Standard   Premium   Ultra   Ultimate Side Shields: Fixed   Removable Polarized Lenses	\$15   \$15   \$65   \$100	\$15   \$15   \$65   \$100	
Side Shields: Fixed   Removable	N/A   N/A	\$0   \$0	
Polarized Lenses	\$75	\$75	
Photochromic Lenses (i.e. Transitions®, etc.)/ Plastic   Glass Scratch Protection Plan: Single Vision   Multifocal Lenses	\$65   \$15	\$65   \$15	
Scratch Protection Plan: Single Vision   Multifocal Lenses	\$20   \$40	\$20   \$40	
Trivex Lenses	\$50	\$50	
Blue Light Filtering Digital Single Vision Lenses	\$15	\$15	
Digital Single Vision Lenses	\$30	\$30	

<sup>9</sup> Some limitations apply to additional discounts, discounts not applicable at all in-network providers <sup>27</sup> The Davis Vision Collection is available at most participating independent provider locations. <sup>34</sup> Including, but not limited to toric, multifocal and gas permeable contact lenses. <sup>34</sup> Including, but not limited to toric, multifocal and gas permeable contact lenses.

<sup>6</sup> P utilizing the safety eyeglass benefit with the comprehensive dress eyewear plan, one eye examination will cover both requirements.
<sup>6</sup> Davis Vision's Safety Frame Collection meets or exceeds the Z87.1 American National Standard and the requirements of the Occupational Safety and Health Administration (OSHA) for impact resistance.
<sup>6</sup> Polycarbonate lenses meet or exceed the Z87.1 American National Standard and the requirements of the Occupational Safety and Health Administration (OSHA) for impact resistance.

<sup>77</sup> Transitions<sup>®</sup> is a registered trademark of Transitions Optical Inc.

## **Frequently Asked Questions**

#### How can I contact Member Services?

Call 1.800.999.5431 for automated help 24/7. Live help is also available seven days a week: Monday-Friday, 8 a.m.-11 p.m. | Saturday, 9 a.m.-4 p.m. | Sunday, 12 p.m.-4 p.m. (Eastern Time). (TTY services: 1.800.523.2847.)

#### What frames are in Davis Vision's Collection?

Our Collection offers a great selection of fashionable and designer frames, most of which are <u>covered in full</u>. No wonder 8 out of 10 members select a Collection frame. Log on to our member Web site at davisvision.com and take a look!

#### When will I receive my eyewear?

Your eyewear will be delivered to your network provider generally within five business days of order receipt. Special prescriptions, lens coatings, provider frames or out-of-stock frames may delay the standard turnaround time.

#### Do I need a claim form?

Claim forms are only required if you visit an out-of-network provider. Claim forms are available on our member Web site.

#### Can I split my benefits?

You may split your benefits by receiving your eye examination and eyeglasses or contact lenses on different dates or through different provider locations. Complete eyeglasses must be obtained at one time, from one provider. You may not split between a network and out-of-network provider. To maximize your benefit value we recommend that all services be obtained from a network provider.

#### Can I use an out-of-network provider?

Yes; however, you receive the greatest value by staying in-network. If you go out-of-network, pay the provider at the time of service, then submit a claim to Davis Vision for reimbursement, up to the following amounts: eye exam - \$40 | single vision lenses - \$40 | bifocal - \$60 | trifocal - \$80 | lenticular - \$100 | frame - \$50 | elective contacts - \$75 | visually required contacts - \$225.

#### Are there any exclusions to the vision benefits?

Your vision plan does not cover medical treatment of eye disease or injury; vision therapy; special lens designs or coatings, other than those described herein; replacement of lost eyewear; nonprescription (plano) lenses; contact lenses and eyeglasses in the same benefit cycle; services not performed by licensed personnel; two pair of eyeglasses in lieu of bifocals.

### **DAVIS VISION EXTRAS!**

**One Year Breakage Warranty** Repair or replacement of your plan covered spectacle lenses, Collection frame or frame from a network retail location where the Collection is not displayed.

**Additional Savings** Members will receive 50% off of additional complete pairs of eyeglasses and sunglasses at Visionworks and 30% off at other participating providers on the same transaction. Otherwise, a 20% discount off the provider's usual and customary rate is available. Contact lenses are available at a 10% discount.<sup>/8</sup>

**Mail Order Contact Lenses** Replacement contacts (after initial benefit) through www.DavisVisionContacts.com mail-order service ensures easy, convenient, purchasing online and quick, direct shipping to your door. Log on to our member Web site for details.

**Laser Vision Correction** Davis Vision provides you and your eligible dependents with the opportunity to receive discounted laser vision correction, often referred to as LASIK. For more information, visit www.davisvision.com.

**Low Vision Services** Comprehensive low vision evaluation once every five years and low vision aids up to the plan maximum. Covers up to four follow-up visits in five years.

**Eye Health & Wellness** Log on and learn more about your eyes, health and wellness; common eye conditions that can impair vision; and what you can do to ensure healthy eyes and a healthier life.

**For more details...** about your vision benefits, patient rights and responsibilities, or more information about Davis Vision, please log on to our member Web site or contact us at 1.800.999.5431.

Davis Vision has made every effort to correctly summarize your vision plan features herein. In the event of a conflict between this information and your organization's contract with Davis Vision, the terms of the contract will prevail.

<sup>8/</sup>Some limitations apply to additional discounts, discounts not applicable at all in-network providers.

Fully insured product Underwritten by HM Life Insurance Company. Administered by Davis Vision, which may operate as Davis Vision Insurance Administrators in California.