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## **Superior Vision Plan I - Full Services Plan**

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**Effective Date: October 1, 2011**

Outline of Benefits - Gold Preferred Plan With Materials Discount  
Vision Plan- Preferred Provider (PPO / Indemnity)

CoPayment Amount - \$20.00 - Comprehensive Eye Exam  
\$0 - Materials  
\$35.00 - Contact Lens Fitting

### **How to Use the Plan**

Welcome to Superior Vision's vision plan. Superior Vision provides primary vision care benefits including eye examinations, prescription eyewear, and contact lenses through a broad-based provider network consisting of ophthalmologists, optometrists, and opticians. The plan also contracts with a large number of national and regional optometric chain locations.

Your first step should be to choose an eye care provider, or ensure that your current provider is part of the Superior Vision network. Go to [www.superiorvision.com](http://www.superiorvision.com) and click on "Locate a Provider" for an updated list. You will learn about "in-network" and "out-of-network" providers – it is an important distinction when receiving your benefits. You will also learn more about how to use your benefits, as well as the discounts that are available to you.

Remember that a routine eye exam is important not only for correcting vision problems, but for maintaining healthy eyes and overall health wellness. Superior Vision eye care providers are trained to test for and diagnosis a variety of health issues – not just eye problems. Take the time to get to know your vision plan, and start experiencing healthy eyes and healthy living.

<b>BENEFITS</b>	<b>FREQUENCY</b>	<b>IN-NETWORK<sup>1</sup></b>	<b>NON-NETWORK<sup>1</sup></b>
<b>Comprehensive Exam</b>			
Ophthalmologist	12 Months	Covered in Full	Up to \$44.00
Optometrist	12 Months	Covered in Full	Up to \$39.00
<b>Standard Lenses (Per Pair)</b>			
Single Vision	12 Months	Covered in Full	Up to \$34.00
Bifocal	12 Months	Covered in Full	Up to \$48.00
Trifocal	12 Months	Covered in Full	Up to \$64.00
Lenticular	12 Months	Covered in Full	Up to \$88.00

(CONT.)

<b>BENEFITS</b>	<b>FREQUENCY</b>	<b>IN-NETWORK<sup>1</sup></b>	<b>NON-NET WORK<sup>1</sup></b>
<b>Contact Lenses (Per Pair)<sup>2</sup></b>			
Medically Necessary	12 Months	Covered in Full	Up to \$210.00
Cosmetic (Elective) <sup>3</sup>	12 Months	Up to \$100.00	Up to \$100.00
<b>Contact Lens Fitting<sup>4</sup></b>			
Standard	12 Months	Covered in Full	Not Covered
Specialty	12 Months	Up to \$50.00	Not Covered
<b>Frames (Standard)**</b>	24 Months	Up to \$100.00	Up to \$50.00

<sup>1</sup> All in-network and out-of-network allowances are at the retail value.

<sup>2</sup> Contact lenses are in lieu of eyeglass lenses and frames benefits.

<sup>3</sup> The insured is responsible for paying any charges in excess of this allowance.

### **Discount Features**

Look for providers in the Provider Directory who accept discounts; please verify their discounts prior to service.

### **Discounts on Covered Materials**

Frames:	20% off amount over allowance
Lens options:	20% off retail
Progressives:	20% off amount over retail lined trifocal lens, including lens options

The following options have out-of-pocket maximums on standard plastic single vision lenses, and select options are available on standard bifocal and trifocal lenses. Out-of-pocket maximums are not available on premium options or progressives.

### **Maximum Member Out-of-Pocket**

	<b><u>Single Vision</u></b>	<b><u>Bifocal &amp; Trifocal</u></b>
Scratch coat	\$13	\$13
Ultraviolet coat	\$15	\$15
Tints, solid or gradients	\$25	\$25
Anti-reflective coat	\$50	\$50
Polycarbonate	\$40	20% off retail
High-index 1.6	\$55	20% off retail
Photochromic	\$80	20% off retail

## Discounts on Non-Covered Exam and Materials

Superior Vision offers discounts on an unlimited number of materials after the member has exhausted their covered benefit.

Exams, frames, and prescription lenses:	30% off retail
Lens options, contacts, other prescription materials:	20% off retail
Disposable contact lenses:	10% off retail

## Refractive Surgery

Superior Vision has a nationwide network of refractive surgeons and partnerships with leading LASIK networks (QualSight, TruVision, and LasikPlus) who offer members a discount. These discounts range from 20%-50%, and are the best possible discounts available to Superior Vision.

<sup>4</sup>Discounts and maximums may vary by lens type. Please check with your provider.

\*Higher end or brand name lens upgrades are at an additional expense. These upgrades will be available at a 20% discount off retail.

## Items or Services Not Covered

While Superior Vision offers a variety of vision benefits, there are a few materials, services, and treatments that are generally not covered, or have limitations to their coverage. We do offer discounts on many of these items, as outlined in our discount plan coverage information. For a list of these, please see your benefits administrator. Please confirm the details of your employer's plan prior to seeking services.

## Superior Vision Contacts

**Customer Service**  
**800-507-3800**  
**916-852-2277 Fax**

Explanation of benefits  
Provider locator; provider nomination  
Claims inquiries  
Authorization numbers (out-of-network)  
Grievance issues

**Customer Service/Corporate Office**  
11101 White Rock Rd., Ste. 150  
Rancho Cordova, CA 95670

**Claims Administration**  
P.O. Box 967  
Rancho Cordova, CA 95741

Disclaimer: All final determinations of benefits, administrative duties, and definitions are governed by the Certificate of Insurance Coverage for your vision plan. Please check with your Benefits Administrator or Human Resources department if you have any questions.



The Superior Vision Plan is underwritten by National Guardian Life Insurance Company. National Guardian Life Insurance Company is not affiliated with The Guardian Life Insurance Company of America, a/k/a The Guardian or Guardian Life

**MONTHLY RATES**

Employee Only	\$9.76
Employee + Family	\$24.52

