SUMMARY OF BENEFITS

<table>
<thead>
<tr>
<th>VisionCare Services</th>
<th>In-Network Member Cost</th>
<th>Out-of-Network Reimbursement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exam With Dilatation &amp; Necessary Retinal Imaging</td>
<td>$10 Co-pay</td>
<td>Up to $250 Off</td>
</tr>
<tr>
<td>Frames</td>
<td>$0 Co-pay; $200 Allowance</td>
<td>N/A</td>
</tr>
<tr>
<td>Single Vision</td>
<td>$20 Co-pay</td>
<td>Up to $250 Off</td>
</tr>
<tr>
<td>Bifocal</td>
<td>$20 Co-pay</td>
<td>Up to $250 Off</td>
</tr>
<tr>
<td>Trifocal</td>
<td>$20 Co-pay</td>
<td>Up to $250 Off</td>
</tr>
<tr>
<td>Standard Progressive Lens</td>
<td>$20 Co-pay</td>
<td>Up to $250 Off</td>
</tr>
<tr>
<td>Premium Progressive Lens</td>
<td>$20 Co-pay</td>
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</tr>
<tr>
<td>Trifocal</td>
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</tr>
<tr>
<td>Tier</td>
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**Lens Options**

- UV Treatment: $15
- Tint: $15
- Standard Plastic/Scratch Coating: $15
- Standard Polycarbonate: $40
- Standard Polycarbonate Kids: $40
- Standard Anti-Reflective Coating: $57
- Premium Anti-Reflective Coating: $57
- Tier: $57
- Tier: $88
- Tier: $88
- Tier: $88
- Tier: $88
- Tier: $88
- Polarized: $75
- Photochromic/Transitions: 20% off retail price
- Multi-Focal: 15% off the retail price
- Other Add-Ons & Services: 20% off retail price

**Contact Lens Fit & Follow-Up**

- Standard Contact Lens Fit & Follow-Up: Up to $120 Off
- Premium Contact Lens Fit & Follow-Up: 10% off retail price

**Contact Lenses**

- Conventional: $25 Co-pay; $200 Allowance; Up to $200 Off
- Disposable: $20 Co-pay; $200 Allowance; Up to $200 Off
- Medically Necessary: $0 Co-pay; Paid-in-Full
- Laser/Vision Correction: Up to $200 Off
- Lasik: 15% off retail price
- PRK: 15% off retail price
- Conventional: 15% off retail price

**Frequency**

- Examination: Once every 12 months
- Lenses: Once every 12 months
- Frames: Once every 12 months

**Vision Care**

- Contact Lens Fit & Follow-Up: (Contact lens fit and two follow up visits are available once a comprehensive eye exam has been completed)
- Contact Lenses: (Any remaining balance for contact lenses may be used within the same Benefit Frequency)
- Premium Progressive Lens: 0 Co-pay
- Standard Progressive Lens: 0 Co-pay
- Bifocal: 0 Co-pay
- Single Vision: 0 Co-pay
- Standard Plastic Lenses: 0 Co-pay
- Standard Polycarbonate: 0 Co-pay
- Standard Polycarbonate Kids: 0 Co-pay
- Standard Anti-Reflective Coating: 0 Co-pay
- Premium Anti-Reflective Coating: 0 Co-pay
- Tint (Solid and Gradient): 0 Co-pay
- Photochromic/Transitions: 0 Co-pay
- Polarized: 0 Co-pay
- Multi-Focal: 15% off retail price
- Other Add-Ons & Services: 20% off retail price
What’s in it for me?
Options. It’s simple really. We’re dedicated to helping you see clearly—and that’s why we’ve built a network that gives you lots of choices and flexibility. You can choose from thousands of independent and retail providers to find the one that best fits your needs and schedule. No matter which one you choose, our plan is designed to be easy-to-use and help you access the care you need. Welcome to EyeMed.

Benefits Snapshot

<table>
<thead>
<tr>
<th>Benefit</th>
<th>With EyeMed</th>
<th>Out-of-Network Reimbursement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exam with dilation as necessary (Once every 12 months)</td>
<td>$15 Co-pay</td>
<td>Up to $35</td>
</tr>
<tr>
<td>Frames (Once every 12 months)</td>
<td>$0 Co-pay; $200 allowance; 20% off balance over $200</td>
<td>Up to $1000</td>
</tr>
<tr>
<td>Single vision lenses (Once every 12 months)</td>
<td>$0 Co-pay</td>
<td>Up to $25</td>
</tr>
<tr>
<td>Or Contacts (Once every 12 months)</td>
<td>$0 Co-pay; $200 allowance; plus balance over $200</td>
<td>Up to $1600</td>
</tr>
</tbody>
</table>

And now it’s time for the breakdown . . .

Here's an example of what you might pay for a pair of glasses with us vs. what you'd pay without vision coverage. So let's say you get an eye exam and choose a frame that costs $163 with single vision lenses that have UV and scratch protection. Now let’s see the difference...

With EyeMed

- Exam $15 Co-pay
- Frame $163
- Lens $0 Co-pay
- Total $45.00

Without Insurance**

- Exam $106
- Frame $163
- Lens $78
- Total $395

89% Savings with us*

Download the EyeMed Members App
It’s the easy way to view your ID card, see benefit details and find a provider near you.

*This image snapshot reflects actual savings with EyeMed provider networks and elections. **Based on industry averages.