

Vision Plan Benefits for The University of Texas System



Superior Basic Plan

Superior Plus Plan

Monthly Premiums

Employee Only	\$5.90	\$9.00
Employee + Spouse	\$9.30	\$14.08
Employee + Child(ren)	\$9.52	\$15.08
Employee + Family	\$15.10	\$21.30

Co-pays

Exam	\$35	\$35
Materials	\$0	\$0
Contact Lens Fitting	\$35	\$35

Services/Frequency

Exam	1 per plan year	1 per plan year
Frames	1 per plan year	1 per plan year
Contact Lens Fitting	1 per plan year	1 per plan year
Lenses	1 per plan year	1 per plan year
Contact Lenses	1 per plan year	1 per plan year

Benefits

	<u>In-Network</u>	<u>Out-of-Network</u>	<u>In-Network</u>	<u>Out-of-Network</u>
Exam (Ophthalmologist)	Covered-in-full ¹	Up to \$42 retail	Covered-in-full ¹	Up to \$42 retail
Exam (Optometrist)	Covered-in-full ¹	Up to \$37 retail	Covered-in-full ¹	Up to \$37 retail
Frames	\$140 retail allowance	Up to \$53 retail	\$150 retail allowance	Up to \$53 retail
Contact Lens Fitting (Standard)	Covered-in-full ¹	Not covered	Covered-in-full ¹	Not covered
Contact Lens Fitting (Specialty ²)	\$50 retail allowance ¹	Not covered	\$50 retail allowance ¹	Not covered
Lenses (Standard) Per Pair:				
Single Vision	Covered-in-full	Up to \$32 retail	Covered-in-full	Up to \$32 retail
Bifocal	Covered-in-full	Up to \$46 retail	Covered-in-full	Up to \$46 retail
Trifocal	Covered-in-full	Up to \$61 retail	Covered-in-full	Up to \$61 retail
Polycarbonate, for dependent children only (up to age 25)	Not covered	Not covered	Covered-in-full	Not covered
Scratch coat (factory)	Not covered	Not covered	Covered-in-full	Not covered
Ultraviolet coat	Not covered	Not covered	Covered-in-full	Not covered
Progressive lens	See description ³	Up to \$61 retail	\$120 retail allowance ⁵	Up to \$61 retail
Contact Lenses ⁴	\$125 retail allowance	Up to \$100 retail	\$150 retail allowance	Up to \$100 retail

¹ After co-pays. Co-pays apply to in-network benefits only

² Specialty contact lens fitting fee applies to new contact lens wearers and/or a member who wears toric, gas permeable, or multifocal lenses

³ Covered at the provider's in-office retail price for a standard lined trifocal; member pays difference between the progressive and the trifocal minus a 20% discount on the overage. Applicable co-pay applies

⁴ Contact lenses are in lieu of eyeglass lenses and frame benefit

⁵ Overage on standard progressive lenses will be the member's responsibility

How to Use the Plan

Welcome to Superior Vision. Superior Vision provides primary vision care benefits including eye examinations, prescription eyewear, and contact lenses through a provider network of ophthalmologists, optometrists, and almost every national and regional optical retail chain location.

Your first step is to choose an eye care provider, or ensure that your current provider is part of the Superior Vision network. Go to SuperiorVision.com and use "Locate a Provider" for an updated list. You may also call Customer Service at 800.507.3800 for this information. Within the Q&A section of this brochure, 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 wellness. Superior Vision eye care providers will be looking for signs that may indicate other vision and health issues, from macular degeneration and glaucoma to diabetes, hypertension, and high cholesterol. Take the time to get to know your vision plan, and start experiencing healthy eyes and healthy living.

Discounts

Members should look for providers in the online provider directory who accept discounts; please verify their discounts prior to service as discounts may vary by location. Discounts are subject to change without notice. Discounts do not apply if prohibited by the manufacturer.

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

Maximum Member Out-of-Pocket

The following options have out-of-pocket maximums⁶ on standard (not premium, brand, or progressive) plastic lenses.

	Single Vision	Bifocal and Trifocal
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

⁶Discounts and maximums may vary by lens type. Please check with your provider. The Plan discount features are not insurance.

Discounts on Non-Covered Exam and Materials

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 leading LASIK networks, including University Lasik Specialists of Texas, who provide a discount to members. These discounts range from 15%-50%, and are the best possible discounts available to Superior Vision. Please see our website for information and links to the providers.

Questions and Answers

Forms & ID Cards

Where do I get my ID card?

One ID card is sent to the subscriber after enrollment for the subscriber and all dependents covered by the plan. Additional ID cards can be downloaded and printed directly from the member section of our website, SuperiorVision.com, or you may call Customer Service at 800.507.3800 to have one sent to you.

Must I show my Superior Vision ID card to the in-network provider to receive services?

No, though the ID card includes helpful information and phone numbers for the provider to reference regarding your benefits. While you don't need your card, it is important that you always identify yourself as a Superior Vision member.

Do I need to obtain an authorization number, form, or voucher from Superior Vision prior to obtaining services from an in-network provider?

No, our in-network providers will handle the authorization and claims filing processes for you.

Using Your Benefits

What is the difference between an in-network provider and out-of-network provider?

Your vision benefits are offered through a PPO (Preferred Provider Organization) plan. There are "in-network" providers and "out-of-network" providers. You may obtain products or services through any provider you choose, though you will generally pay less with our in-network providers. When visiting an in-network provider, you are responsible for paying any applicable co-pay, and for items that are not covered or exceed your benefit limitations. When visiting out-of-network providers, you pay for all services in full, and then file a claim with Superior Vision for reimbursement according to your out-of-network benefits schedule.

If you have questions about the amount you are being asked to pay, request that the in-network provider call Superior Vision's Customer Service department.

Do my dependents need to use my personal identification number to receive the insured benefits?

You and your covered dependents share the same personal subscriber identification number.

May I go to one provider for the eye exam and another provider for the materials?

Yes. Superior Vision offers choice and flexibility, enabling members to choose the provider who best matches your location and budget preferences. Each provider will call Superior Vision's Customer Service department to verify your eligibility.

How does the retail frame allowance work?

Your frame allowance (found on your card and in your Benefit Summary) is the amount your benefits cover for your frames. If the retail price of the frame is greater than your frame allowance, you will pay the difference. Some providers may also give a discount on your out-of-pocket cost for the frame.

How much will I pay if I select materials and services that are NOT covered?

You will be responsible for the full amount for materials and services not covered by your benefit. This may include allowance overages, certain lens options, or materials after you have exhausted your benefits. Based on the provider selected, discounts may apply. (See the Discounts section.)

How can I use my cosmetic (elective) contact lens allowance?

If you choose to wear contact lenses in lieu of glasses as your vision correction, the specified allowance may be applied toward the purchase of any type of elective contact lenses. Your benefit is greater when dispensed by an in-network provider.

What are "medically necessary" contact lenses?

Medically necessary (non-elective) contact lenses are prescribed by a doctor solely for purposes of correcting a specific medical condition, such as keratoconus or other conditions that prevent your vision from being corrected to a specified level of visual acuity using conventional eyeglasses. Choosing contacts over glasses for a standard prescription is considered cosmetic/elective.

What is a Contact Lens Fitting exam?

A Contact Lens Fitting (CLF) exam measures and examines your eyes for the purpose of evaluating them for contacts, and your provider charges a separate fee for this service. The CLF is an additional, stand-alone benefit – it is separate from your contact lens benefit. Of value to you is that the CLF charges do not get deducted from your contact lens allowance.

How are progressive lenses covered?

In the Basic Plan, progressives are covered at the provider's in-office retail price for a standard lined trifocal. You pay the difference between your selected progressive lens and your provider's lined trifocal, less discounts when applicable. For the Plus Plan, progressives are covered up to the retail allowance. You are responsible for any overage, less discounts when applicable.

May I utilize in-store specials, promotions, or coupons along with my Superior Vision Plan benefit?

Your benefits provide discounted rates from in-network providers, and cannot be used in conjunction with coupons, promotions, sales, or other types of discounts. An exception: if you use the services of an in-network provider but choose to take advantage of a sale, coupon, or other in-store special, the provider may require that you pay in full and then submit your receipt to Superior Vision for reimbursement at the out-of-network rates. If you have questions about the use of discounts, call Customer Service before you seek services as rules may vary from state to state and be subject to state laws.

In-Network Providers

How do I know which services are offered by an in-network Superior Vision provider?

All in-network providers are listed in our online directory with the specific services for which they have contracted. If you need assistance locating a provider, visit SuperiorVision.com or call Customer Service at 800.507.3800.

What do I need to pay my in-network provider?

You pay your provider any applicable co-pay, plus you are also responsible for paying for any services or materials that are not covered or exceed your benefit plan coverage.

What if my eye doctor is not listed as an in-network provider?

If you have verified on our website that your provider is not a participating provider, you may complete a Provider Nomination form located in the member section of our website. Fill out this form online, and check back with Superior Vision periodically to see if the provider has joined our network.

Out-of-Network Providers

May I go to an out-of-network provider?

Yes. You and your dependents may choose services from an out-of-network provider. You will be reimbursed at the out-of-network rate detailed in your Benefit Summary.

How can I use my benefit when seeking services from an out-of-network provider?

First, verify that the provider you wish to see is not in our network. Then, obtain an authorization number from our Customer Service department. Schedule your appointment, and pay the provider directly for the services rendered.

How do I get reimbursed when I use an out-of-network provider?

Obtain a claim form either from the member section of our website, or from a Customer Service Representative. Complete the claim form and attach your original receipt or itemized bill that explains what services were provided. Mail or fax these to Superior Vision's Customer Service. You will be reimbursed up to the allowable amount as outlined in the out-of-network section of your Outline of Benefits.

Using Discounts

What discounts are available?

Your specific discount features are listed in the Discounts section of this brochure. You are eligible for discounts off the retail charges for a variety of lens upgrades and add-ons, overages on frame allowances, and/or additional frame and lens purchases. Services must be obtained from a provider indicated in our provider directory as accepting our discounts as some providers do not. Be sure to show your Superior Vision ID card to ensure you receive these discounts.

Are there any limitations on the frame selection when using the discounts?

Unless otherwise prohibited by the manufacturer, the frame discount may be applied to any frame as long as you seek services from a provider who accepts our discounts.

Can discounts be applied toward the purchase of prescription sunglasses, i.e., tints to a covered lens?

Unless otherwise prohibited by the manufacturer, the discounts for lens tinting can be applied as long as you seek services from a provider who accepts our discounts.

Superior Vision's SmartAlert Vision Wellness Program

What is Superior Vision's SmartAlert program?

Superior Vision's SmartAlert program facilitates communication between you, your eye care provider, and your medical plan providers about lifestyle or health issues that may impact your eyes and vision. While participation is completely voluntary by both members and providers, participation may help you keep on top of current health issues or aid in the early recognition and diagnosis of something new. The SmartAlert program includes the *My Vision Lifestyle Update* and *Provider Communications* forms.

How may I obtain a copy of the My Vision Lifestyle form?

This form is available within the member section of our website. You may print it, complete it, and take it with you to your eye care appointment.

How will my Superior Vision eye doctor share information about my eye exam with my medical health plan provider?

Your doctor may complete the *Provider Communication* form (available in the member section of our website) and give it to you at the conclusion of your visit. You may take this form to your health plan provider for review and inclusion in your chart or records. This is NOT a referral form but a voluntary sharing of information. All medical referrals should conform to the information detailed in your medical health plan.

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 discounts description. Your specific Superior Vision Plan may differ, so confirm the details of your employer's plan prior to seeking services.

Items or Services Not Covered or Have Limited Coverage*

- Non-prescription (plano) lenses of any kind, sunglasses, or contact lenses
- Any coating applied to lenses such as anti-reflective, scratch, UV, lamination, tints (except pink tint #1 and #2), and sunglass coloring
- Any lens materials other than standard plastic or glass such as polycarbonate, hi-index, polaroid, and photochromic
- Any special lens feature or treatment such as prisms, slab off, faceted, oversize lens greater than 61mm, polished bevel, groove, drill mount, notch, roll and polish, and blended bifocal
- Replacement of broken, lost, or damaged frames and/or lenses
- Orthoptics, vision training, and developmental vision procedures
- Experimental or non-conventional treatment or device
- Medical or surgical treatment of the eyes
- Post-cataract lenses (intra-ocular) subnormal or low vision aids
- Eye examination or corrective eyewear required by an employer as a condition of employment
- Services or materials when covered under workers' compensation or similar third party coverage
- Services or materials rendered by a provider other than an ophthalmologist, optometrist, or optician acting within the scope of his or her license
- Any additional services or procedures outside of a routine eye exam and contact lens fitting
- Services or materials rendered after the date a member ceases to be covered by the benefits plan except when vision materials ordered before coverage ended are delivered AND the corresponding services are provided to the member within 31 days of the initial order

Regardless of optical necessity, benefits are not available more frequently than that which is specified in the Outline of Benefits.

* The Basic and Plus Plans vary, so please refer to your benefits coverage sheet.

Disclaimer: All final determinations of benefits, administrative duties, and definitions are governed by the Certificate of Insurance Coverage for your vision plan.



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.

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