

Your group **vision** benefits

Voluntary Vision for ALL MEMBERS		
Vision care benefits are provided on a copay/allowance basis when visiting in-network VSP providers and on a scheduled basis when visiting non-network providers.		
Doctor Network	VSP Choice Network	
Covered Charges	Benefit	Frequency
Exams	\$10 copay	One exam every 12 months
Prescription Glasses	\$25 copay	
Lenses	Single vision, lined bifocal, lined trifocal and lenticular lenses; polycarbonate lenses for dependent children under age 18	Two lenses (one pair) every 12 months
Frames	\$150 allowance for a wide selection of frames; 20% off amount over allowance***	One set every 24 months
Lens Enhancements	Most popular lens enhancements are covered after a copay, saving members an average of 20-25%. Members should see their doctor for special pricing on additional lens enhancements.	
Elective Contacts	Up to \$60 copay for standard and premium elective contact lens exam (fitting and evaluation) \$150 allowance for elective contacts	Once every 12 months Contacts are instead of frames and lenses
Necessary Contacts**	\$25 copay Covered in full for members who have specific conditions	Once every 12 months Contacts are instead of frames and lenses

ADDITIONAL SAVINGS

Glasses and Sunglasses	20% off unlimited additional pairs of prescription glasses and non-prescription sunglasses***
Contacts	15% off cost of contact lens exam (fitting and evaluation), excluding materials***
Laser Vision Correction	Average 15% off the regular price or 5% off the promotional offer for laser surgery including PRK, LASIK, and Custom LASIK.

COVERAGE WITH NON-NETWORK PROVIDERS

Covered Charges	Benefit	Frequency
Vision Exams	Up to \$45	One per 12 month period
Single Vision lenses	Up to \$30	One pair per 12 month period
Lined bifocal lenses	Up to \$50	One pair per 12 month period
Lined trifocal lenses	Up to \$65	One pair per 12 month period
Lenticular lenses	Up to \$100	One pair per 12 month period
Frames	Up to \$70	One set per 24 month period
Elective Contacts	Up to \$105	In lieu of lens and frame benefits
Necessary Contacts**	Up to \$210	In lieu of lens and frame benefits

**Necessary contact lenses are prescribed to correct extreme visual problems that cannot be corrected with regular lenses.
***Based on applicable laws; benefits may vary by doctor location.

There is Coordination of Benefits, which is a procedure for limiting benefits from two or more carriers to 100% of the claimant's covered expenses.

PARTICIPATION

Quote assumes current 31% participation will continue.

Note: An Annual Enrollment Period is included.

ELIGIBILITY

Eligible employees include full-time employees actively working at least 30 hours per week. Employees must be enrolled for vision coverage before it can be offered to their dependents. Eligible dependents include the employee's spouse, domestic partner, and children, including those of a domestic partner. Additional eligibility requirements may apply.

FUTURE ENROLLEES

Late entrants (those enrolling more than 31 days after becoming eligible) will be subject to an individual benefit waiting period, subject to plan guidelines.

LIMITATIONS

The proposed policy contains restrictions and limitations. Before making a purchase decision, review the following limitations and resolve any questions. The following limitations and restrictions are applied as required by state law or as otherwise described in the group policy.

No benefits will be paid for: visual analysis or vision aids that are not medically necessary / services and/or materials not specifically included in the benefit schedule / plano lenses / two pairs of glasses instead of bifocals / replacement of lenses, frames and/or contact lenses furnished under this plan which are lost or damaged / orthoptics, vision training or supplemental testing / medical or surgical treatment of the eyes / contact lens insurance policies or service agreements / refitting of contact lenses after the initial fitting period / contact lens modification, polishing or cleaning, local state and/or federal taxes, except where required by law. Benefits will not be paid for any vision care expense for: which proof is submitted by a person who is part of the member's or dependent's immediate family / vision aids provided outside the United States.



General provisions for non-medical insurance

RENEWING YOUR COVERAGE

Your non-medical insurance runs annually or based on your rate guarantee period, but no less than annually, unless the policy terminates before that date. While the insurance is in force and subject to its termination provisions, you may renew at the applicable premium rates in effect on your anniversary.

TERMINATION AND RENEWABILITY OF YOUR COVERAGE

The insurance is renewable for all insureds at your option. Principal Life has the right to nonrenew or terminate the insurance if: you fail to pay premium / fraud or misrepresentation occurs / your firm relocates to a state where Principal Life does not offer group coverage(s) provided by your policy / your firm no longer meets the participation or contribution rules / you no longer qualify as an eligible business or group / we give you advance notice of termination as required by your state / you fail to provide Principal Life with information that is reasonably required or fail to perform any of your obligations pertaining to your STD or LTD policy.

POLICY CHANGES

Principal Life has the right to modify coverage under the group policy at any time to meet legal requirements or to ensure consistent application of policy provisions. In addition, you may request coverage changes, subject to approval by Principal Life.

FEDERAL & STATE LAWS

Various federal and state laws may affect the rights of insureds to continue coverage. The Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA), the Family Medical Leave Act (FMLA) and the Uniform Services Employment and Reemployment Rights Act of 1994 (USERRA) are examples. As an employer, you are responsible for meeting the obligations imposed by any federal and state continuation laws. However, we design and administer our policies to comply.