BENEFITS ENROLLMENT

Vision Care Insurance

EyeMed Vision Care provides comprehensive vision care benefits to help ensure you and your dependents receive quality eye care from a network of professional eye care providers. Participation allows you and your dependents to obtain an eye examination, glasses or contact lenses from a network provider at an affordable cost. You may participate in the vision care plan or elect no coverage.

The EyeMed Vision Care Provider Network Directory for Nebraska may be viewed on the university's benefits webpage. Network participation information may also be obtained by calling EyeMed Vision Care at (877) 226-1115.

Summary of Vision Benefits

| | IN-NETWORK MEMBER COST | BENEFIT FREQUENCY | OUT-OF-NETWORK REIMBURSEMENT |
|---|--|-------------------|------------------------------|
| Examination with Dilation | \$10 copay | Annual | Up to \$35 |
| Frames | 80% of retail price over \$150 allowance | Annual | Up to \$38 |
| Standard Plastic Lenses | | | |
| Single Vision | \$10 copay | Annual | Up to \$25 |
| Bifocal | \$10 copay | Annual | Up to \$40 |
| Trifocal | \$10 copay | Annual | Up to \$55 |
| Standard Progressive | \$10 copay | Annual | Up to \$55 |
| Premium Progressive | \$10 copay, 80% of balance over \$130 | Annual | Up to \$55 |
| Contact Lenses Fit and Follow-up | | | |
| Standard | Up to \$55 | Annual | NA |
| Premium | 90% of retail price | Annual | NA |
| Contact Lenses Allowance (materials only) | | | |
| Conventional | 85% of balance over \$130 allowance | Annual | Up to \$96 |
| Disposable | Balance over \$130 allowance | Annual | Up to \$96 |
| Medically Necessary | \$0 | Annual | Up to \$200 |
| LASIK and PRK Vision Correction | 15% off retail price or 5% off promotional pricing | Unlimted | NA |

^{*} Benefit includes a discount for lens options such as UV coating, tint, scratch-resistance coating, etc.

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Issues to Consider—Vision Care Insurance

- Enrollment of any dependent into the vision care plan requires completion of the Dependent Information Request Form, which is available on the university's benefits webpage.
- If you use the services of a non-EyeMed network provider, you will experience higher out-of-pocket costs due to lower out-of-network allowances.
- If you have non-covered vision expenses to pay, qualifying expenses may be submitted to the Health Care Flexible Spending Account.
- Vision coverage for a newborn child will begin at the dependent child's date of birth. The applicable premium will begin on the first day of the month following the date of birth. To continue the child's coverage beyond 31 days, you must contact the Campus Benefits Office within 60 days of a dependent's date of birth to add the newborn child to your vision care insurance policy. You must complete and deliver to the Campus Benefits Office a Dependent Information Request Form to add the new dependent child to the vision care insurance policy even if you are currently enrolled for Employee & Child or Employee & Family coverage. If the newborn child is added, the coverage change and related increase in premiums will be effective the first of the month following the dependent's date of birth. (While the dependent information request form must be received within 60 days of the baby's birth, and a copy of the birth certificate and six months to provide the social security number.) If you do not complete and deliver the properly completed Dependent Information Request Form to the Campus Benefits Office within 60 days of the newborn's birth and then want to cover the child, the child will be considered a late enrollee and benefits will not be provided to the child until the next annual NUFlex enrollment. (No coverage changes are allowed as a result of a Permitted Election Change Event.)
- Dependent information must be received in the Campus Benefits Office within 31 days from date of hire, benefits eligibility date or Permitted Election Change Event. If you do not complete and deliver the properly completed Dependent Information Request Form and dependent verification documentation to the Campus Benefits Office within 31 days of date of hire, benefits eligibility date or Permitted Election Change Event and then want to cover the dependents, the dependents will be considered a late enrollee and benefits will not be provided until the next annual NUFlex enrollment.