



# DIRECT VISION INSURANCE

No Waiting Periods

Choice of EyeMed  
or VSP Networks

30 Day Satisfaction  
Guarantee

Underwritten by:



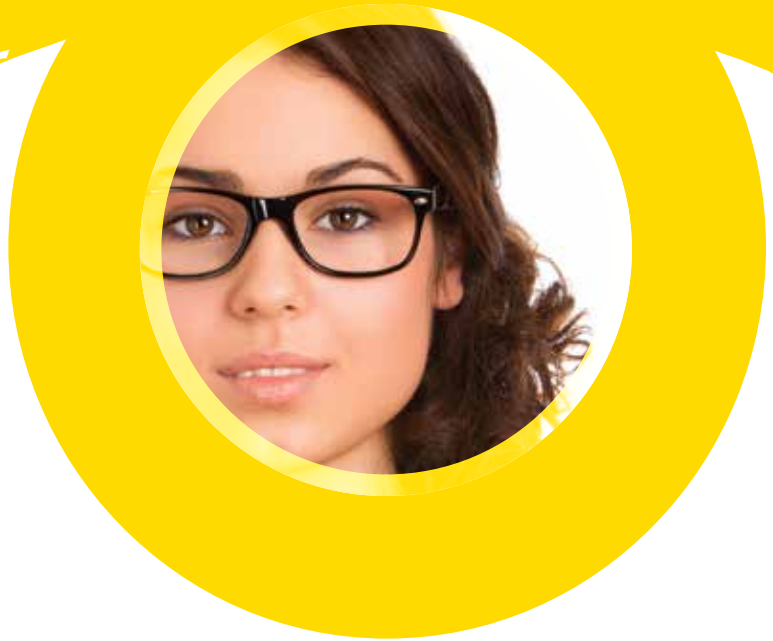
10901 Red Circle Drive  
Minnetonka, MN 55343-9137

Marketed by:



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[www.directvisioninsurance.com](http://www.directvisioninsurance.com)

# DIRECT VISION INSURANCE



## You'll like what you see with Direct Vision.

Protecting your eyes starts with having routine eye exams. With Direct Vision you'll be covered for one routine eye exam per year – starting on day one of your coverage!

### Choice of Providers

The Direct Vision Insurance plans include in-network and out-of-network benefits. Choose from EyeMed or VSP network plans. Why choose a network? When you use a network provider you maximize your benefits with low co-pays and overall lower out-of-pocket costs.

If you choose to see an out-of-network provider, these plans provide you with an allowance for each service and you are responsible for any costs above those amounts.

### About EyeMed

EyeMed providers include nationally recognized chains such as Pearle Vision, LensCrafters, Target, Sears and JCP Optical as well as independent providers. Choose from over 78,000 vision care providers nationwide. By utilizing an EyeMed provider you will receive additional savings such as:



- 40% off unlimited additional eyeglasses after initial benefit is exhausted
- 20% discount on remaining frame balance (once allowance has been applied) and 15% discount on any balance over the conventional contact lens allowance
- 5% - 15% savings on LASIK or PRK services through the US Laser Network

Find an EyeMed provider near you at [eyemed.com](http://eyemed.com) and select the Access Network, or call **866.939.3633**.

### About VSP

VSP offers a national network of 31,000 private practice providers. In addition VSP offers discounts and savings that include:



- 20% savings on frames over the frame allowance
- \$20 additional frame allowance if you select a featured frame brand
- Savings of 20% on additional glasses and sunglasses
- Discounts on laser surgery, including LASIK

To find a VSP provider near you, visit [vsp.com](http://vsp.com) (choose the Choice Network) or call **800.877.7195**.

 Underwritten by  
**SECURITYLIFE**  
INSURANCE COMPANY OF AMERICA  
10901 Red Circle Drive  
Minnetonka, MN 55343-9137

Marketed by  
**DIRECT  
BENEFITS INC.**

# EyeMed – Choose from two plans.

## EYEMED ACCESS PLAN A

- Eye Exam** focuses on your eye health and overall wellness
- \$15 co-pay .....every 12 months
- Contact Lens Exam & Fitting**  
Standard and premium contact lens exam and fitting
- \$15 co-pay .....every 12 months
- Frames**
- Up to \$150 frame allowance.....every 12 months
- Contacts (in lieu of lenses and frame)**
- Up to \$150 allowance .....every 12 months
- Single/Bifocal/Trifocal or Lenticular Lenses**
- \$25 co-pay .....every 12 months

## EYEMED ACCESS PLAN B

- Eye Exam** focuses on your eye health and overall wellness
- \$15 co-pay .....every 12 months
- Contact Lens Exam & Fitting**  
Standard and premium contact lens exam and fitting
- \$15 co-pay .....every 24 months
- Frames**
- Up to \$150 frame allowance.....every 24 months
- Contacts (in lieu of lenses and frame)**
- Up to \$150 allowance .....every 24 months
- Single/Bifocal/Trifocal or Lenticular Lenses**
- \$25 co-pay .....every 24 months

## EYEMED DIRECT VISION RATES

	EyeMed Access Plan A	EyeMed Access Plan B
Individual	\$15.02	\$11.53
Individual +1	\$27.64	\$21.22
Family	\$41.31	\$31.71

## Lenses and frames.

- Standard plastic single, bifocal, trifocal or lenticular lenses coverage with discounts available on additional lens options.
- 40% off unlimited additional eyeglasses after initial benefit is exhausted.
- Receive 20% discount on remaining frame balance (once allowance has been applied) and 15% discount on any balance over the conventional contact lens allowance.

## Glasses.com and contactsdirect.com.

Members can use **Glasses.com** and **contactsdirect.com** as an in-network option to purchase frames and contacts.

For glasses:

- Simply send a picture of the prescription. Lenses are available for most prescriptions, including progressives and multifocals.
- Orders are fulfilled and shipped free the following day.
- Once received if you need an adjustment visit any LensCrafters.

For contacts:

- Select your lenses from a wide selection of top selling brands.
- Contacts will ship as soon as the prescription is verified – most that same day – and for free.

## Additional benefits at no additional cost.\*

- 5-15% savings on LASIK or PRK services through the US Laser Network.

## Out-of-network benefits.

Direct Vision also offers out-of-network benefits. Members will realize the biggest benefit savings when they utilize an in-network provider, but our plans reflect the understanding that it is not always possible. When an out-of-network provider is utilized, the member pays the provider the appropriate fees and then requests reimbursement from the plan. The plan will reimburse up to the amounts indicated in the schedule to the right.

ADDITIONAL STANDARD LENS ENHANCEMENTS	SINGLE VISION	MULTIFOCAL VISION
UV Protection Coating	\$15	\$15
Glass Tints	\$15	\$15
Solid Plastic Dye	\$15	\$15
Plastic Gradient Dye	\$15	\$15
Standard Scratch-Resistance	\$15	\$15
Standard Polycarbonate Lens	\$40	\$40
Anti-Reflective Coating	\$45	\$45
Photochromic Lens - Plastic	Retail Discount	Retail Discount
Standard Progressive	\$65	\$65
Other Add-Ons and Services	Retail Discount	Retail Discount

## MAXIMUM ALLOWANCE OUT-OF-NETWORK

Exams	\$50
Frames	\$70
Single Vision Lens	\$50
Bifocal Lens	\$75
Progressive Lens	\$75
Trifocal Lens	\$100
Elective Contact Lenses	\$105
Medically Necessary Contact Lenses	\$250

\* These additional discounts and value-added features are not a part of the insurance plan and there is no affiliation or ownership between Security Life and these programs.

The EyeMed Direct Vision Insurance plans are available in all states except: AK, FL, MA, MD, NY, RI, VA, WA and PA counties of Adams, Bradford, Cameron, Forest, Huntington, Mifflin, Montour, Potter, Sullivan, Tioga, and Warren.

NOTICE: This provides a very brief description of some of the important features of the insurance policy. It is not the insurance policy and does not represent it. A full explanation of benefits, exceptions and limitations is contained in Individual Vision Policy Form IP3000 (and any state specific). This policy is renewable at the option of the insured. This product may not be available in all states and is subject to individual state regulations.

For the Outline of Coverage and Replacement Notice, visit [www.directvisioninsurance.com](http://www.directvisioninsurance.com).



# VSP – Choose from two plans.

## VSP CHOICE PLAN A

- Eye Exam** focuses on your eye health and overall wellness
- \$15 co-pay .....every 12 months
- Contact Lens Exam & Fitting**  
Standard and premium contact lens exam and fitting
- Up to \$60.....every 12 months
- Frames**
- Up to \$150 frame allowance.....every 12 months
- Contacts (in lieu of lenses and frame)**
- Up to \$150 allowance .....every 12 months
- Single/Bifocal/Trifocal Lenses**
- \$25 co-pay .....every 12 months

## VSP CHOICE PLAN B

- Eye Exam** focuses on your eye health and overall wellness
- \$15 co-pay .....every 12 months
- Contact Lens Exam & Fitting**  
Standard and premium contact lens exam and fitting
- Up to \$60.....every 24 months
- Frames**
- Up to \$150 frame allowance.....every 24 months
- Contacts (in lieu of lenses and frame)**
- Up to \$150 allowance .....every 24 months
- Single/Bifocal/Trifocal Lenses**
- \$25 co-pay .....every 24 months

## VSP DIRECT VISION RATES

	VSP Choice Plan A	VSP Choice Plan A (MD only)	VSP Choice Plan B	VSP Choice Plan B (MD only)
Individual	\$15.97	\$15.49	\$12.22	\$11.74
Individual +1	\$29.38	\$28.51	\$22.48	\$21.60
Family	\$43.91	\$42.60	\$33.60	\$32.29

## Frames, glasses and sunglasses.

- Receive 20% savings on frames over the frame allowance.
- Select a featured frame brand and receive an extra \$20 on the frame allowance.
- Savings of 20% on additional glasses and sunglasses.

## Lens enhancements.

- Lens enhancements co-pay applies to single and multi-focal vision lens enhancements with the exception of glass tints (\$44) and polycarbonate (\$35) which have higher multi-focal co-pays.

## Additional benefits at no additional cost.\*

### Laser VisionCare Program<sup>SM</sup>

- Contracted laser centers provide discounts averaging 15% off laser surgery, including photorefractive keratectomy (PRK), laser-assisted in-situ keratomileusis (LASIK) and Custom LASIK.
- If the laser center is offering a price reduction, you'll receive an additional 5% off the promotional price.

### Low Vision

- Low vision is vision loss sufficient enough to prevent reading and performing daily activities. With pre-approval from VSP, low vision supplemental testing and low vision aids up to \$1000 are covered every 2 years.

## Out-of-network benefits.

Direct Vision also offers out-of-network benefits. Members will realize the biggest benefit savings when they utilize an in-network provider, but our plans reflect the understanding that it is not always possible. When an out-of-network provider is utilized, the member pays the provider the appropriate fees and then requests reimbursement from the plan. The plan will reimburse up to the amounts indicated in the schedule to the right.

ADDITIONAL STANDARD LENS ENHANCEMENTS	SINGLE VISION	MULTIFOCAL VISION
UV Protection Coating	\$16	\$16
Glass Tints Solid and Dyes (Except Pink I & II)	\$34	\$44
Solid Plastic Dye (Except Pink I & II)	\$15	\$15
Plastic Gradient Dye	\$17	\$17
Factory Applied Standard Scratch-Resistance Coating	\$17	\$17
Polycarbonate Lens	\$31	\$35
Anti-Reflective Coating	\$41	\$41
Photochromic Lens - Plastic	\$70	\$82
Standard Progressive	N/A	\$55
Other Add-Ons and Services	Available at Discount	Available at Discount

MAXIMUM ALLOWANCE OUT-OF-NETWORK	ALL STATES (Except MD)	MD ONLY
Exams	\$50	\$59
Frames	\$70	\$62
Single Vision Lens	\$50	\$23
Bifocal Lens	\$69	\$36
Progressive Lens	\$69	\$36
Trifocal Lens	\$85	\$48
Lenticular Lens	\$119	\$56
Elective Contact Lenses	\$105	\$120
Medically Necessary Contact Lenses	\$210	\$200

\* These additional discounts and value-added features are not a part of the insurance plan and there is no affiliation or ownership between Security Life and these programs.

The VSP Direct Vision Insurance plans are available in all states except: AK, FL, MA, NY, RI, VA, WA.

NOTICE: This provides a very brief description of some of the important features of the insurance policy. It is not the insurance policy and does not represent it. A full explanation of benefits, exceptions and limitations is contained in Individual Vision Policy Form IP3000 (and any state specific). This policy is renewable at the option of the insured. This product may not be available in all states and is subject to individual state regulations.

For the Outline of Coverage and Replacement Notice, visit [www.directvisioninsurance.com](http://www.directvisioninsurance.com).





# Frequently Asked Questions for Direct Vision Insurance Members

## Who is eligible for this plan?

Individuals 18+ years of age and their eligible dependents up to age 26.

## How quickly can I start my coverage?

The Direct Vision Insurance plans provide four options for effective dates. Choose the one that works best for you and your family. You will receive an email confirmation immediately following your enrollment to verify this information. Your policy will arrive within 10 business days of enrollment.

**IMPORTANT NOTICE:** Your enrollment may take 2-3 business days before it comes accessible to the EyeMed or VSP provider. If you have an appointment within several days of your effective date and your provider indicates you are not yet in their system, please call Security Life customer service for assistances. Representatives are available Monday – Friday at **800.300.9566**.

## What if I change my mind above the coverage shortly after enrolling?

Direct Vision Insurance comes with a 30-day Customer Satisfaction Guarantee. You have 30 days after your plan becomes effective to cancel your plan if you are not satisfied for any reason. Any premium paid, minus the enrollment fee, will be fully refunded provided no covered services have been rendered.\* If services have been provided, you may still cancel your policy however the premium paid will not be eligible for reimbursement.

\* Plan includes a one-time non-refundable enrollment fee of \$25. This charge will be made at the time of purchase and may appear as a separate transaction from your vision insurance.

## Will I receive an ID Card?

- If you enroll in the EyeMed plan – yes you will receive an ID card.
- With the VSP plan you will not receive an ID card. An ID card is not required when visiting a VSP provider. Simply tell your VSP provider you have the VSP Choice Network plan. If you would like to print an ID card for yourself or covered family members simply visit [vsp.com](http://vsp.com) to download card(s).

## Where can I go to find a vision provider?

- Find EyeMed providers at **[www.EyeMed.com](http://www.EyeMed.com)** (choose the Access Network) or call **866.939.3633**.
- Find VSP providers at **[www.VSP.com](http://www.VSP.com)** (Choose the Choice Network) or call **800.877.7195**.

## Who should I contact with questions?

- For benefit or changes to your coverage please contact Security Life customer service at **800.300.9566** or use the self-service portal tool.
  - With MyPortal you have access to your policy information on any device, anytime, anywhere. MyPortal gives you the ability to:
    - View and edit personal and dependent information, including adding or deleting dependents
    - View and edit payment information
    - Request to terminate coverage
    - Request an ID card, if the plan you are covered under offers that option.
- Registering online is easy! You just need your Member ID. Get started register at: **[www.securitylife.com/myportal](http://www.securitylife.com/myportal)**.
- You can also make changes by using a paper Change Form and submitting to Security Life. You can obtain a paper form by calling customer service at **800.300.9566**.
- Please note that changes in coverage may decrease or increase your premium with any increase amount due at the time of change.

## Who should I contact regarding a claim?

- For questions regarding a claim contact EyeMed at **800.521.3605**.
- For questions regarding a claim, contact VSP at **800.877.7195**.

## What can you tell me about Security Life, the insurance company underwriting this plan?

- Security Life Insurance Company of America, a wholly-owned subsidiary of Ameritas, is headquartered in Minnetonka, Minnesota, with an administrative office in Lancaster, PA. Security Life has been providing ancillary insurance benefits for both individuals and groups on a national basis since 1956.

## LIMITATIONS AND EXCLUSIONS

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The cost of replacement frames will not be covered, unless the existing frame is not compatible with the replacement lenses.

We will not pay or provide alternate benefits for any of the following:

1. Items, treatments or services: (a.) not listed as an eligible expense; (b.) not prescribed by or performed by or under the direct supervision of a vision provider; (c.) not visually necessary to restore or maintain a patient's visual acuity and health; (d.) not meeting the accepted standards of vision practice; (e.) experimental in nature; or (f.) covered under any other insurance policy providing vision care.
2. Orthoptic or vision training, subnormal vision aids, and any associated supplemental testing; Aniseikonic lenses.
3. Plano lenses and/or contact lenses (less than a  $\pm .50$  diopter power).
4. Non-prescription sunglasses.
5. Two pair of glasses in lieu of bifocals or trifocals.
6. Medical and/or surgical treatment of the eye, eyes, or supporting structures.
7. Any eye or vision examination, or any corrective eyewear, required as a condition of employment; Safety eyewear.
8. Replacement of lenses, frames or contacts furnished under this policy that are lost or broken, except at the normal intervals when services are otherwise available.
9. Corneal refractive therapy or orthokeratology.
10. Artistically painted contact lenses.
11. Additional office visits for contact lens pathology.
12. Contact lens modification, polishing or cleaning.
13. Services provided as a result of any Workers' Compensation law, or similar legislation, or required by any governmental agency or program whether federal, state or subdivisions thereof.
14. Services rendered after the date an Insured ceases to be covered under the policy, except when vision materials ordered before coverage ended are delivered, and the services rendered to the Insured are within 31 days from the date of such order.
15. Charges for service agreements or insurance policies.
16. Charges for sterilization of equipment; disposal of medical waste or other requirements mandated by OSHA or other regulatory agencies.
17. Telephone consultations, charges for failure to keep a scheduled appointment, or charges for completion of a claim form.
18. Codes that are by report.
19. Ancillary charges, including but not limited to, hospital, ambulatory surgical center or similar facility; or use of provider office space.

### BENEFITS ARE LIMITED AS FOLLOWS:

(1) In the event you transfer from the care of one vision provider to that of another during the course of treatment, or if more than one vision provider performs services for one qualifying expense, we shall be liable for not more than the amount we would have been liable for had but one vision provider performed the service.

### WHEN WILL MY COVERAGE BEGIN

The Direct Vision Insurance plan provides four options for effective dates. Choose the one that works best for you and your family. You will receive an email confirmation immediately after enrollment to verify this information. Your policy will arrive within 10 business days of enrollment.

**IMPORTANT NOTICE: Your enrollment will take 2-3 business days before it becomes accessible in the EyeMed or VSP provider systems. If you have an appointment within several days of your effective date and your provider indicates you are not yet in their system, please call Security Life customer service for assistance. Representatives are available Monday-Friday at 800.300.9566.**

Plan includes a one-time non-refundable enrollment fee of \$25. This charge will be made at the time of purchase and may appear as a separate transaction from your vision insurance.

# About the Direct Benefits Insurance Team

**Direct Vision Insurance is available exclusively through Direct Benefits, Inc.**

Direct Benefits, Inc. is a managing general agency that provides one-stop employee benefits to over 8,000 independent agents, brokers, consultants and general agents in all 50 states.

We're in it for the little people of America. Our mission is to provide individuals and small businesses with the same or better quality insurance products as Fortune 500 companies. By partnering with financially strong insurance carriers like Security Life we are able to create exclusive niche products like Direct Vision Insurance.



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