

OPTIONAL VISION INSURANCE

Plan Level	Employee Cost Per Month
Employee Only	\$8.28
Dual (Employee +1)	\$15.32
Family (Employee +2 or more)	\$23.56

Benefits	EyeMed Insight Network	Out-of-Network
Deductibles		
- Annual Eye Exam	\$10.00	No deductible
- Eye Glass Lenses	\$25.00	
Annual Eye Exam	Covered in full, after deductible, every 12 months	Up to \$35.00
Lenses-Single, Bifocal, Trifocal	Covered in full, after deductible, every 12 months	\$25.00 - \$55.00
Lenses-Lenticular	20% discount	Not covered
Lenses-Progressive	See lens options below	Not covered
Frame Allowance	\$150.00 every 24 months	Up to \$75.00
Contacts (in lieu of glasses)	\$150.00 allowance every 12 months	Up to \$120.00
Fit & Follow up exams		
- <i>Standard</i>	Participant cost up to \$40.00	Not covered
- <i>Premium</i>	10% off of retail	Not covered
- Elective	Up to \$150.00	Up to \$120.00
- Medically Necessary	Covered in full	Up to \$200.00
Lens Options-participants cost		
- Progressive Lenses		
- <i>Standard</i>	\$65.00 plus lens deductible	Not covered
- <i>Premium</i>		
Tier 1	\$85.00 plus lens deductible	Not covered
Tier 2	\$95.00 plus lens deductible	Not covered
Tier 3	\$110.00 plus lens deductible	Not covered
Tier 4	\$65.00 plus 80% of charge less \$120.00 allowance	Not covered
Standard Polycarbonate	\$40.00	Not covered
Tint (solid and gradient)	\$15.00	Not covered
Scratch Resistant Coating	\$15.00	Not covered
Anti-Reflective Coating		
- <i>Standard</i>	\$45.00	Not covered
- <i>Premium</i>		
Tier 1	\$57.00	Not covered
Tier 2	\$68.00	Not covered
Tier 3	80% of the charge	Not covered
Ultraviolet Coating	\$15.00	Not covered
Lasik or PRK	Average discount of 15% off retail, or 5% promotional	Not covered

eCard

Once you are enrolled in the plan, your plan participant ID card is provided electronically. Access your eCard online by creating a Secure Member Account – it's fast, easy and secure. Go to standard.com, click on log in (at top right). Enrolled participants may receive care without the card just by giving the provider their name, date of birth, and social security number/member identification number.

Vision Plan Participant Service

Balanced Care Vision II from The Standard features the money-saving eye care network of EyeMed Vision Care. Customer service is available to plan participants through EyeMed's well-trained and helpful service representatives. Call or go online to locate the nearest EyeMed Access network provider, view plan benefit information and more.

EyeMed Customer Care Center: 866.289.0614

* Service representative hours: 8 a.m. to 11 p.m. ET Monday through Saturday, 11 a.m. to 8 p.m. ET Sunday

Locate an EyeMed provider at:

www.standard.com/services

About The Standard

For more than 100 years, we have been dedicated to our core purpose: to help people achieve financial well-being and peace of mind. Headquartered in Portland, Oregon, The Standard is a nationally recognized provider of group employee benefits. To learn more about products from The Standard, visit us at **www.standard.com**.

The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of Portland, Oregon, in all states except New York. Product features and availability vary by state and are solely the responsibility of Standard Insurance Company.

This form is a benefit highlight, not a certificate of insurance. This policy has exclusions, limitations, reductions of benefits, and terms under which the policy may be continued in force or terminated. Please contact The Standard or your employer for additional information, including costs and complete details of coverage.