Davis Vision Plan Summary

With your Davis Vision Preferred Provider Organization (PPO) Plan you can:

- Go to any licensed Davis vision provider and receive coverage. Just remember your benefit dollars go further when you stay in network.
- Choose from a large network of ophthalmologists, optometrists and opticians, from private practices to retailers like Warby Parker, Costco® Optical, Walmart®, Sam's Club®, Visionworks® and Target Optical®.

In-network value added features:

Additional savings on lens enhancements:[5] Save an average of 20-25% over retail on all lens enhancements not otherwise covered under the Davis Vision Insurance program.

Additional savings on glasses and sunglasses:[5] A 20% discount off the provider's usual and customary rate may be available. When buying additional complete pairs of eyeglasses or sunglasses on the same transaction as their primary benefit, members may receive 50% off the additional pair at Visionworks® and 30% off at other participating providers.

Additional savings on frames:[5] 20% off any amount over your frames allowance.

Additional savings on contacts:[5] 15% off any amount over your contact lens allowance. 15% same-day discount on additional contacts beyond your covered amount. 10% after-service discount on additional contacts beyond your covered amount.

Laser vision correction:[5] Savings of 20% - 35% off the national average price of traditional LASIK are available at over 1,000 locations across our nationwide network of laser vision correction providers.

In-network Covered Benefits

There are no claims for you to file when you go to an in-network Davis vision provider. Simply pay any copays or member out of pocket amount (MOOP) and, if applicable, any amount over your frame/contact allowance at the time of service

	Frequency
Eye exam	Once every **12** months
• Eye health exam, dilation, prescription and refraction for glasses: Covered in full after **$10** copay.	
• Retinal imaging: Up to a **$39** copay on routine retinal screening when performed by a private practice.	
Frame	Once every **12** months
• Allowance: **$130** after **$10** eyewear copay[1].	
OR	
• Exclusive Collection Frame Copay (in lieu of Allowance) for 3 tiers of the Collection: Premier: Covered / Covered / Covered	
Participating private practice providers typically do not display the Collection but are contractually required to maintain a comparable selection (in both quantity and quality) of frames that would be covered, with no additional member out-of-pocket expense. Special lens designs, materials, powers and frames may require additional cost. Collection is available at most participating independent provider offices. Collection is subject to change.	
Standard corrective lenses	Once every **12** months
• Single vision, lined bifocal, lined trifocal, lenticular: Covered in full after **$10** eyewear copay[1].	
Standard lens enhancements[2]	Once every **12** months
• Standard Polycarbonate (child up to age 18)[3] : Covered in full after **$10** eyewear copay[1].	
• Progressive Standard, Progressive Premium/Custom, Standard Polycarbonate (adult)[3], UV coating, Scratch-resistant coatings, Solid or Gradient Tints, Anti-reflective, Photochromic, Blue Light filtering, Digital Single Vision, Polarized, High Index (1.67 / 1.74): Your cost will be limited to a member out of pocket amount (MOOP) that MetLife has negotiated for you. These amounts may be viewed after enrollment at www.metlife.com/mybenefits.	

[1] Materials co-pay applies to lenses and frames only, not contact lenses.

[2] The above list highlights some of the most popular lens enhancements and is not a complete listing.

[3] Polycarbonate lenses are covered for dependent children, monocular patients, and patients with prescriptions +/- 6.00 diopters or greater.

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In-network value added features continued:

Free one-year breakage warranty: All Davis Collection eyeglasses come with a breakage warranty for repair or replacement of the frame and/or lenses for a period of one year from the date of delivery. The one-year breakage warranty applies only to Davis Collection frames and lenses installed in them. Warranty does not apply to non-Collection frames.

Hearing discounts: [5] A National Hearing Network of hearing care professionals, featuring Your Hearing Network, offers Davis Vision members discounts on services, hearing aids and accessories. These discounts should be verified prior to service.

Contact lenses (instead of eye glasses)[4]

Once every **12** months

- Contact fitting and evaluation: Not Covered.
- Elective lenses: **$130** allowance.

**Number of contact lens boxes may vary based on manufacturer's packaging.*

- Necessary lenses: **Covered in full** with prior authorization
- Discounts:[4]
  - 15% off the amount over your contact lens allowance.
  - Same-day purchase of additional contacts: 15%
  - After-service purchase of additional contacts: 10%

We're here to help

Find a Davis Vision provider at www.metlife.com/vision and select 'Davis Vision by MetLife'.

For general questions at any time, call 1-833-EYE-LIFE (1-833-393-5433). Once your coverage is effective, visit our member website at www.metlife.com/mybenefits.

[4] Not all providers participate in vision program discounts, including the member out-of-pocket features. Call your provider prior to scheduling an appointment to confirm if the discount and member out-of-pocket features are offered at that location. Discounts and member out-of-pocket are not insurance and subject to change without notice.

[5] These features may not be available in all states and with all in-network vision providers. Discounts are not available at Walmart and Sam's Club. Please check with your in-network vision provider.

Out-of-network reimbursement

You pay for services and then submit a claim for reimbursement. The same benefit frequencies for **In-network benefits** apply. Once you enroll, visit www.metlife.com/mybenefits for detailed out-of-network benefits information.

- Materials allowance after a **$0** copay
- Eye exam: up to **$45** after a **$0** copay.
- Frames: up to **$70**
- Contact lenses:
  - Elective up to **$105**
  - Necessary up to **$210**
- Single vision lenses: up to **$30**
- Lined bifocal lenses: up to **$50**
- Lined trifocal lenses: up to **$65**
- Lenticular lenses: up to **$100**
- Progressive lenses: up to **$50**

Important: If you or your family members are covered by more than one health care plan, you may not be able to collect benefits from both plans. Each plan may require you to follow its rules or use specific doctors and hospitals, and it may be impossible to comply with both plans at the same time. Before you enroll in this plan, read all of the rules very carefully and compare them with the rules of any other plan that covers you or your family.

Savings from enrolling in a MetLife Vision Plan will depend on various factors, including plan premiums, number of visits to an eye care professional by your family per year and the cost of services and materials received. Be sure to review the Schedule of Benefits for your plan's specific benefits and other important details.

MetLife Vision benefits are underwritten by Metropolitan Life Insurance Company, New York, NY. Certain claims and network administration services are provided through Davis Vision, Inc. ("Davis Vision"), a New York corporation. Davis Vision is part of the MetLife family of companies.

Like most group benefit programs, benefit programs offered by MetLife and its affiliates contain certain exclusions, exceptions, reductions, limitations, waiting periods, and terms for keeping them in force. Please contact MetLife or your plan administrator for costs and complete details.

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