

ANDREW M. CUOMO GOVERNOR STATE OF NEW YORK DEPARTMENT OF CIVIL SERVICE ALFRED E. SMITH STATE OFFICE BUILDING ALBANY, NEW YORK 12239 www.cs.ny.gov

## NY 11- 50 PE 11- 32 SEHP 11- 13

TO: New York State Agency Health Benefits Administrators;
 Health Benefits Administrators of Participating Employers offering the NYS Vision Plan;
 Student Employee Health Insurance Plan (SEHP) Health Benefits Administrators

**FROM:** Employee Benefits Division

## SUBJECT: NYS Vision Plan Vendor Change to Davis Vision

**DATE:** December 21, 2011

Effective January 1, 2012, the New York State Vision Plan will be administered by Davis Vision. Davis Vision will provide claims payment, enrollment data management, distribution of plan implementation materials, and an extensive network of eye care providers throughout New York State and nationwide. Although the carrier is changing, the benefit design is not changing.

The following employee groups are covered under the NYS Vision Plan:

- New York State employees designated Management/Confidential (M/C);
- Enrollees of certain Participating Employers;
- Council 82 employees in the Security Supervisors Unit represented by the NYS Law Enforcement Officers' Union, District Council 82 (C-82);
- ALESU employees in the Agency Law Enforcement Unit (ALESU) represented by the Police Benevolent Association of New York State, Inc. (PBANYS);
- NYSCOPBA employees in the Security Service Unit represented by the NYS Correctional Officers and Police Benevolent Association, Inc (NYSCOPBA);
- PBA employees in the Troopers and Supervisors Units of the Division of State Police represented by the NYS Police Benevolent Association of NYS Troopers, Inc. (PBA);
- PEF employees in the Professional, Scientific and Technical Unit represented by the Public Employee Federation (PEF);
- PIA represented employees in the BCI Unit of the Division of State Police: and
- SEHP employees in the Student Employee Health Plan (SEHP) represented by the Graduate Student Employees Union (GSEU) or CUNY graduate student employees

The enclosed Davis Vision FAQ document and Member Welcome Kit templates provide information on the transition of the NYS Vision Plan from EyeMed to Davis Vision.

In late-December, Davis Vision will mail to enrollees' homes:

- the Davis Vision Care Member Welcome Kit describing vision benefits
- two (2) ID cards
- information on how to access the Davis Vision web site from the Employee Benefits portion of the Department's web site (<u>www.cs.ny.gov/ebd</u>). This site will allow registered users to access benefit information, locate a provider, order replacement ID cards and more. Enrollees may access this web site beginning January 1, 2012
- a listing of a sample of in-network providers, based on enrollee zip code.

The file for this mailing was pulled from NYBEAS on November 27, 2011, so any enrollee added after this date will not receive this initial mailing but will be caught in the subsequent follow-up mailing.

In January 2012, a Vision Plan Benefit booklet with additional Plan information and forms will be mailed to enrollees' homes. Enrollees will be able to download and print a copy of the benefit booklet from the Employee Benefits portion of the Department's web site, NYSHIP Online (https://www.cs.ny.gov/ebd) starting in late January, 2012.

## **Additional Information/Ordering Publications**

As new materials, publications, and information become available, we will inform you. We will provide instructions for ordering Vision Plan Benefit booklets in late January 2012. Procedures are being developed at this time. Meanwhile, if you have any questions about this distribution, please call the Employee Benefits Division at (518) 402-4114.

Enclosure(s)

# **DAVIS VISION**

# Talk Sheet / FAQ New York State Vision Plan

December 21, 2011

## Introduction

Effective January 1, 2012, the New York State Vision Plan will be administered by Davis Vision. Davis Vision will provide claims payment, enrollment data management, distribution of plan materials, and an extensive network of eye care providers throughout New York and nationwide. As of January 1, 2012, EyeMed Vision Care will no longer administer the NYS Vision Plan and optical retailers such as LensCrafters, Target Optical, Sears Optical, JCPenny Optical and Pearl Vision will no longer be participating providers.

## **About Davis Vision**

Davis Vision has been providing eye care programs since 1917, including 23 years experience administering the New York State Vision Plan. Davis Vision offers a provider network which includes over 26,000 points of access nationwide and access to over 2,332 providers in New York State. The Davis Vision provider network includes both independent practitioners and company-owned retail chains. The key features of the Davis Vision program for the State include:

- Doctors of optometry and ophthalmology focused on comprehensive well eye exams
- Access to over 2,332 providers in New York including independent practitioners and company-owned retail chains Empire Vision and EyeCare Centers of America.
- An eyewear frame or contact lens allowance\* or the Davis Vision '*Collection*', an exclusive selection of covered in full eyewear frames and/or contact lens
- Quality care through a network of providers that meet industry quality standards and are monitored through a Quality Assurance program
- A broad selection of lens materials and lens options either covered in full or at discounted prices
- Customized ID cards and benefit information mailed to each enrollee's home

\*Members are responsible for the remaining balance for frames and contact lenses with a retail price above the NYS Vision Plan's frame and contact lens allowances.

## Who is Eligible

All state employees who are eligible to enroll for coverage in the New York State Health Insurance Program (NYSHIP) and for whom coverage under the New York State Vision Plan has been negotiated or administratively extended are eligible. Employees may enroll in the New York State Vision Plan even if they do not enroll in NYSHIP.

Dependent coverage includes a spouse or domestic partner, unmarried children under age 19, unmarried dependent children ages 19 through 24 who are full-time students, and unmarried disabled children. Enrollees must complete a Student Verification Form before a student dependent may receive vision care benefits. A Student Verification Form is not required to be completed for permanently disabled dependent children or dependent children under age 26 covered under the Student Employee Health Plan (SEHP).

## Enrolling

All current enrollees in the NYS Vision Plan (with EyeMed) will be auto-enrolled in the Davis Vision plan, effective January 1, 2012. Thereafter newly eligible employees must file a PS-404 with the agency Health Benefits Administrator. The HBA will then enter the enrollee data into the New York State Benefits Eligibility and Accounting System (NYBEAS) and transfer the information to the Davis Vision system. Eligibility data will be forwarded to Davis Vision weekly. Questions about eligibility and enrolling should be directed to the agency HBA.

## How to Access Benefits

Benefit designs by employee group are included in the attached Welcome Kit templates. The benefit designs have not changed with the transition to the new vision plan administrator, Davis Vision. To access benefits, enrollees simply locate a participating provider, call for an appointment or walk-in to the many providers that accept walk-ins, and present their ID card at the time of service. Enrollees should identify themselves as covered under the New York State Vision Plan and provide their ID and/or name. For in-network providers, no claim forms are needed. For out-of-network benefits, enrollees must pay for services in full and submit a claim form along with receipts to Davis Vision for reimbursement. Out of Network claim forms are available on the custom Davis Vision site for the NYS Vision Plan reachable through NYSHIP online and HBA online (on or after January 1, 2012), by calling a customer service representative or using the Interactive Voice Response System.

Enrollees can locate providers by:

- Referring to the listing based on enrollee zip code included with the ID cards
- Visiting NYSHIP online, www.cs.ny.gov to link to the custom Davis Vision site for the NYS Vision Plan
- Calling the Davis Vision Customer Service Center at 1-888-588-4823

## **Plan Materials**

The NYS Vision Plan is detailed in various communications. Enrollees can learn more about the program through:

- **Davis Vision Welcome Kit**: Each enrollee will receive a welcome kit that includes two ID cards, details about the benefit, information on how to access the benefit and a sample of in-network providers (based on enrollee zip code). Contact information will also be included.
- Vision Benefit Booklet: A benefit book will be mailed to all enrollees (except SEHP enrollees) in January 2012. Agency HBAs will be sent a supply of booklets and will be able to order additional books on an as needed basis to provide to new hires that join the NYS Vision Plan after the start date. Once posted in January 2012, enrollees can also download and print a copy from NYSHIP online, www.cs.ny.gov.
- HBA Online: Details about the program are also included on HBA online.
- **Custom Davis Vision Website for the NYS Vision Plan**: Enrollees can enter the site through a link included on NYSHIP online site. This site allows registered users to access benefit information, locate a provider, review benefits and eligibility status, access forms, download a benefit booklet and request replacement ID cards.

## How to Contact Davis Vision

The following details the options to contact Davis Vision:

- In mid-December, 2011, HBAs can visit HBA online for detailed program information. Enrollees should direct all pre-enrollment questions to their Agency HBA.
- After January 1, 2012, enrollees and HBAs can contact the Davis Vision Customer Service Center by calling 1-888-588-4823, or visit NYSHIP online at www.cs.ny.gov for more information and a link to the custom Davis Vision site for the NYS Vision Plan.
- Contact information for enrollees will be detailed in the welcome kit and benefit booklet mailings to enrollees' homes.

## **Description of Employee Groups**

NYS Vision Plan enrollment includes various union groups as well as an unrepresented component. Each group has vision care benefits available to all of their eligible employees. Benefit books are customized for each group and each group is represented by a NYSHIP group color. The groups include:

## PEF: Professional, Scientific and Technical Services Unit

Represented by the Public Employees Federation AFL-CIO (PEF), the **Professional, Scientific and Technical Services Unit** is comprised primarily of professional and technical personnel. Titles in this unit include attorney, nurse, accountant, social worker, and institution teachers.

## NYSCOPBA: Security Services Unit

Represented by New York State Correctional Officers and Police Benevolent Association, Inc. (NYSCOPBA), the **Security Services Unit** is comprised of State security personnel (other than State Police) and institution safety officers. Titles in this unit include correction officer, corrections sergeant, secure hospital treatment assistant, and safety and security officers.

## **C82: Security Supervisors Unit**

Represented by Council 82, American Federation of State, County and Municipal Employees, AFL-CIO, the **Security Supervisors Unit** is comprised of supervisory security personnel (e.g., correction lieutenant, forest ranger supervisor, chief safety and security officers).

## PIA: State Police Investigators Unit

Represented by the New York State Police Investigators Association, Local 4, I.U.P.A., AFL-CIO (NYSPIA), the **State Police Investigators Bureau of Criminal Investigation Unit** is comprised of investigators and senior investigators in the Division of State Police.

## PBA-T: State Police Troopers Unit

Represented by the Police Benevolent Association (PBA) of the New York State Troopers, Inc., the **State Police Troopers Unit** includes troopers in the Division of State Police.

## PBA-S: State Police CO/NCO Supervisors Unit

Represented by Police Benevolent Association (PBA) of the New York State Troopers, Inc., the **State Police CO/NCO Supervisors Unit** consists of commissioned and non-commissioned officers in the ranks of majors, captains, lieutenants, and various levels of sergeants.

## ALESU: Agency Law Enforcement Services Unit

Represented by The Police Benevolent Association of New York State, Inc. (PBANYS), the **Agency Law Enforcement Services Unit** is comprised of personnel who have police or peace officer duties and responsibilities and are employed in the Department of Environmental Conservation, Office of Parks, Recreation and Historic Preservation, and the State University of New York. Titles in this unit include Environmental Conservation Officer, Park Patrol Officer, Environmental Conservation Investigator, University Police Officer, University Police Investigator, and Forest Ranger.

## SEHP: State University Graduate Student Employee Unit & CUNY

Represented by the Graduate Student Employees Union/Communication Workers of America (GSEU/CWA), the **State University Graduate Student Negotiating Unit** is comprised of teaching assistants and graduate student assistants who are pursuing advanced degrees at SUNY campuses. Most are employed at the four State University Centers (Albany, Binghamton, Buffalo, and Stony Brook.) CUNY enrollees are comprised of teaching assistants and graduate student assistants of teaching assistants who are pursuing advanced degrees at CUNY campuses.

## M/C: Management / Confidential and Unrepresented Employees

The management/confidential (M/C) group is not represented by a union, as defined by the Taylor Law, and include almost 12,000 New York State employees. In this group are policy-making managers, middle managers, and specialists in fields as diverse as education, law, computer science, medicine, administrative support, and law enforcement.

# Frequently Asked Questions: Enrollees

## **Benefit Questions**

1.	Who in my household may be covered by the NYS Vision Plan?	All state employees who are eligible to enroll for coverage in the New York State Health Insurance Program (NYSHIP) and for whom coverage under the New York State Vision Plan has been negotiated or administratively extended are eligible. Employees may enroll in the New York State Vision Plan even if they do not enroll in NYSHIP. Enrollees must satisfy the waiting period applicable to their employee group prior to being eligible for benefits under the Plan. Dependent coverage includes a spouse or domestic
		partner, unmarried children under age 19, unmarried dependent children ages 19 through 24 who are full-time students, and unmarried disabled children. Enrollees must complete a Student Verification Form before a student dependent may receive vision care benefits.
2.	What is the process to cover my unmarried dependent child who is a full-time student and is under age 25?	You will need to complete the Student Verification Form found in your benefit booklet, or on NYSHIP online, and fax it to Davis Vision at 1-800-292-9687, when your full- time student dependent child is eligible for benefits. More information on the process will be detailed in the benefit book you will receive upon enrollment. A Student Verification Form is not required to be
		completed for permanently disabled dependent children or dependent children under age 26 covered under the Student Employee Health Plan (SEHP).
3.	If I am enrolled as an enrollee and a dependent, can I use both plans together or combine my frame or contact lens allowances?	No, if you are eligible for vision benefits as an enrollee and also a dependent, you may not combine the two frame or contact lens allowances in the same transaction. For example, you may not receive a \$200 frame allowance by combining the \$100 frame allowances from both enrollments.
4.	Do my benefits reset on January 1, 2012?	No, your benefits will not reset on January 1, 2012. If you have used your benefit prior to the effective date of the Davis Vision plan, you will be eligible for future services according to the frequency of your benefit plan: once every two years for adults and once a year for dependent children under age 19. Davis Vision will receive benefit history for each enrollee.
5.	Will I have a new network of providers beginning January 1, 2012?	Yes. Davis Visions' participating provider network consists of hundreds of independent providers and all Empire Vision Center and EyeCare Centers of America locations. Optical retailers such as LensCrafters, Target Optical, Sears Optical, JCPenny Optical and Pearl Vision are not part of Davis Visions' participating

		provider network and you will not obtain in-network benefits if you choose to obtain services at any of these retailers.
	Can I go to one provider for my exam and another for materials?	Yes, you may choose to have your exam at one provider and receive your eyewear at another. However, depending on your group, you may be required to purchase eyewear on the same day as the exam.
C V E V	For enrollees eligible for the 90- day material purchase period, what happens if they received an eye exam in 2011, but have not yet filled their prescription? Where should they get their NYS Vision Plan eyewear in 2012?	Enrollees who received an eye exam in 2011 and wait to fill their prescription until 2012 and who are still within the 90-day eligibility period for materials should use a Davis Vision provider for eyewear selection.
E r t a	purchased eyewear under my EyeMed coverage in 2011 and now want to return them, since I have not been able to adjust to the new lenses. What do I do and how do I get my benefit 'reset"?	Eyewear materials purchased under your EyeMed coverage should be returned to the EyeMed provider that provided the materials. They will work with you to get your prescription correct. If the issue can't be corrected and you have returned your eyewear to the EyeMed provider, call EyeMed to have your benefit "reset". EyeMed will coordinate with Davis Vision to reset your eligibility under Davis Vision and then you may choose a Davis Vision provider from whom to purchase your eyewear.
-	How much time do I have to select my eyewear?	This is dependent on the employee group, as some groups require eyewear to be purchased on the same day as the exam. For enrollees eligible to split the benefit, a 90-day period between exam and material selection will still apply.
p a e	When using a participating provider, do I receive an allowance to purchase my eyewear materials or choose from a standard collection?	When using a participating provider, NYS Vision Plan enrollees may either use an allowance towards purchasing their eyewear (glasses or contacts) or they may choose from the Davis Vision Collection (frames or contacts) to receive a paid in full benefit.
	Can I upgrade my frame or lens options if I pay the difference?	Yes, with the NYS Vision Plan, enrollees have the choice of any available frame or lens option. The frame allowance will provide enrollees with a wide selection of frames while staying within the allowance, eliminating any out-of-pocket expenses. Members are responsible for the remaining balance for frames and contact lenses with a retail price above the NYS Vision Plan's frame and contact lens allowances. SEHP enrollees are not eligible for upgrades.
l	How do I calculate my contact ens materials benefit when using my allowance?	For contact lenses, you will apply your contact lens allowance to the retail price of the selected contacts. You pay a copay (if applicable) plus the difference, if any; between the retail price and the allowance after subtracting a 20% discount (SEHP enrollees are not eligible for discounts). A sample contact lens calculation is as follows:

	<ul> <li>Contact Lenses: \$150 retail price</li> <li>Contact Lens Allowance: \$105 allowance</li> <li>Balance after Allowance: \$45</li> <li>Out-of-Pocket: \$36.00 (plus any applicable copay and sales tax)</li> </ul>
13. Why are eye exams important?	Regular eye care is an important part of your overall wellness. Eye exams not only detect vision correction needs, but can also reveal serious eye problems, diabetes and high blood pressure. Eye care is important to all ages, as early on it can affect a child's ability to learn and later in life serious conditions such as glaucoma can occur.

## **Network Questions**

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1.	How is the Davis Vision network	The Davis Vision network provides access to over 2,332
	different?	providers in New York State, and thousands more
		nationwide. The Davis Vision network offers enrollees
		the choice of type of provider to meet your needs.
		Choose from both independent practitioners and
		company-owned retail chains; Empire Vision and Eye
		Care Centers of America. Optical retailers such as
		LensCrafters, Target Optical, Sears Optical, JCPenny
		Optical and Pearl Vision are not Davis Vision
		participating providers.
2.	How do I locate a provider?	A sample of in-network providers will be included in the
	-	Davis Vision welcome kit mailing in late-December. For
		an updated listing, visit NYSHIP online (on or after
		January 1, 2012) at www.cs.state.ny.us and click on the
		link to the custom Davis Vision site for the NYS Vision
		Plan. Enrollees can also locate providers by calling the
		Davis Vision Customer Service Center.
3.	Can I nominate a provider for	Yes, a Provider Nomination form will be available on the
	participation?	custom Davis Vision site for the NYS Vision Plan which
		enrollees can access through the NYSHIP online.
4.	I'm eligible for the laser vision	To locate a laser provider and begin the process,
	correction program, how do I	enrollees should call the 800 Customer Service phone
	locate participating laser	number that will be in the Davis Vision welcome kit
	providers?	mailing in mid-December or access the custom Davis
	-	Vision site for the NYS Vision Plan.
5.	What is the turnaround time for	The turnaround time for glasses will vary depending on
1	my glasses?	the provider location chosen and your specific lens
		requirements, but will not exceed 7 days in most cases
6.	Does my doctor have to use a	Independent providers who participate in the Davis
	specific lab?	Vision program are required to use Davis Vision owned
1		laboratories. This centralized approach allows Davis
		Vision to maintain overall quality. Retail providers who
		participate in the Davis Vision program use their own
		materials and laboratories.
7.	What warrantee applies if I	If an enrollee purchased frames from an EyeMed

## **Operations**

	What is my member ID and do I have to give out my Social Security Number?	The member ID will be the enrollees' social security number and/or an alternate ID number generated by Davis Vision. However, on all printed documents, only the enrollees' alternate ID number will be displayed. If enrollees choose not to give their social security number to a provider or the Davis Vision Customer Service Center, they can identify themselves using their alternate ID or identify themselves as a participant in the NYS Vision Plan and provide their name and date of birth.
2.	Will I get ID cards, how many and when?	Yes, a Davis Vision welcome kit including two ID cards will be mailed to enrollees by the end of December. You should receive the cards prior to the effective date. The ID cards that you receive may be presented by you and/or any covered family member.
3.	How do I order replacement or additional ID cards?	To order replacement cards, enrollees may visit NYSHIP online for a link to the custom Davis Vision site for the NYS Vision Plan, or call the Davis Vision Customer Service Center at 1-888-588-4823.
4.	Where can I find information about the NYS Vision Plan?	Details about the program are included on NYSHIP online, www.cs.ny.gov and in the benefit booklet you receive in January. Additional information is also available on the custom Davis Vision site for the NYS Vision Plan, which you can link to from NYSHIP online (on or after January 1, 2012). If you have additional questions, you may contact the Davis Vision Customer Service Center by calling 1-888-588-4823, beginning in late December, 2011.
5.	When can I call Davis Vision with questions?	The Davis Vision Customer Service Center will be operational in late December to answer your questions.
6.	What are the hours of the Davis Vision Customer Service Center?	Monday through Friday: 8:00am to 11:00pm EST, Saturday: 9:00am to 4:00pm EST and Sunday: 12:00pm to 4:00 pm EST. In addition, enrollees can call the interactive voice response system 24 hours a day/ 7 days a week.
7.	Where do I go on the web to obtain information about the vision plan or to locate providers?	Details about the plan can be found on NYSHIP online at www.cs.ny.gov. There is also a link to the custom Davis Vision site for the NYS Vision Plan which allows registered users to access benefit information, locate a provider, review benefits and eligibility status, access forms, download a benefit book, request replacement ID

	cards and more.
<ul> <li>8. How do I use my out-of-network benefit and where do I get a claim form?</li> </ul>	If you choose to visit an out-of-network provider, you will need to pay for all services at the point of sale and then submit a claim form and receipts to Davis Vision for eligible reimbursements. You will most likely have expenses that exceed your reimbursement. An out-of- network claim form is available on the custom Davis Vision site for the NYS Vision Plan you can link to from NYSHIP online. SEHP enrollees are not eligible for out of network benefits.
9. How can I check the status of a claim submitted?	If you have submitted an out-of-network claim for reimbursement, you can check the status by calling the Davis Vision Customer Care Center and using the automated IVR system.
10. What is the turnaround time for out-of-network claims?	Payments are typically mailed within 10 business days of receipt of the completed claim form and all receipts.
11. What is the student verification process for my dependent?	You will need to complete the Student Verification Form found in your benefit booklet, or on NYSHIP online, and fax it to Davis Vision, at 1-800-292-9687 when your full- time student dependent child is eligible for benefits. More details on the process will be included in the benefit book you will receive upon enrollment. A Student Verification Form is not required to be completed for a disabled dependent child or dependent children under age 26 covered under the Student Employee Health Plan (SEHP).

# Frequently Asked Questions: Health Benefit Administrators

	Who is my one main point of contact at Davis Vision? If an enrollee has a claim issue, who do they call?	Beginning in late December, agency HBAs should call the Davis Vision Customer Service Center at 1-888-588- 4823 with questions. Enrollees can call the Davis Vision Customer Service Center at 1-888-588-4823 with any question or claims issues after the plan effective date.
3.	Will I be receiving a provider directory?	No. On January 1, 2012, a link to the provider locator will be posted on HBA online.
4.	Where do I order benefit booklets?	Agency HBAs will be provided with an ample supply of benefit booklets to provide to new enrollees, as needed. Order forms for additional benefit books will be included in the initial shipment of benefit books to agency HBAs. Books are also available online.
5.	When will ID cards be provided to enrollees?	Once an enrollment file has been processed, the ID card process will begin. Enrollees should receive the ID cards/Welcome Kit by the end of December. Agency HBAs will receive a copy of the ID cards/Welcome Kit prior to them being mailed to enrollees' homes.

	How do I order replacement or additional ID cards?	Agency HBAs are not responsible for ordering new ID cards for enrollees. To order replacement cards, enrollees may visit NYSHIP online for a link to the custom Davis Vision site for the NYS Vision Plan or call the Davis Vision Customer Service Center at 1-888-588-4823.
	How does a new enrollee receive an ID card and benefit booklet?	Once the new enrollee information is entered on NYBEAS and transmitted to Davis Vision, the Davis Vision welcome kit and ID cards will be mailed to the enrollee's home. Agency HBAs should provide the new enrollee with a benefit booklet. The benefit booklet can also be obtained through the custom Davis Vision site for the NYS Vision Plan, which can be accessed through NYSHIP online.
	How often will enrollment data be provided to Davis Vision?	Enrollment data will be transmitted to Davis Vision weekly from the NYBEAS.
	Where can I get a copy of the specific benefit information for each employee group?	Benefit information for each employee group is included at the end of this guide in the sample Welcome Kits. In January 2012, Agency HBAs will be provided with an ample supply of benefit books to provide to new enrollees, as needed. Order forms for additional benefit books will be included in the initial shipment of benefit books to agency HBAs. Books are also available online.
-	What is the student verification process for dependents?	You will need to complete the Student Verification Form found in your benefit booklet, or on NYSHIP online, and fax it to Davis Vision at 1-800-292-9687 when your full- time student dependent child is eligible for benefits. More details on the process will be detailed in the benefit book you will receive upon enrollment. A Student Verification Form is not required to be completed for a disabled dependent child or dependent children under age 26 covered under the Student Employee Health Plan (SEHP).
	Who can assist with enrollee benefit questions, such as calculations?	After the effective date of the program, January 1, 2012, enrollees can call the Davis Vision Customer Service Center at 1-888-588-4823 with any questions.

## Student Employee Health Plan



We are pleased to provide you with information on your vision benefit to help you care for your vision and eye health - a key part of overall health and wellness!



Using your benefits is easy! Visit New York State Department of Civil Service website at https://www.cs.ny.gov. On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website and click "Find a Provider," or call us at 1-888-588-4823.

Make an appointment. Tell your provider your benefit is administered by Davis Vision with coverage under the New York State Vision Plan. Provide your member ID number, name and date of birth, and do the same for your covered dependents seeking vision services. Your provider will take care of the rest!

**100% OF YOUR CALLS & CLAIMS ARE** 

PROUDLY ADMINISTERED IN THE USA

# **New York State Vision Plan Benefits**

Benefit	Frequency Once every -	In-network member cost	In-network Coverage	
Eye Examination	24 months	\$10	Covered in full. Includes dilation when professionally indicated.	
Lenses	24 months	\$0	Plastic or glass single vision, bifocal, trifocal or post cataract lenses. (See below for additional lens options and coatings.)	
Frame	24 months	\$0 or 100% of balance over \$80	Covered in Full Frames: (Basic) frame from Davis Vision's Collection <sup>/1</sup> OR, Frame Allowance: \$80 toward any frame.	
Contact Lens Evaluation, Fitting & Follow Up Care	24 months	\$0	Covered in full for Standard.	
<b>Contact Lenses</b> (in lieu of frame and lenses)	24 months	\$0 or 100% of balance over \$105	Covered in Full Contacts/2:       From Davis Vision's Collection/1, up to:         Planned Replacement       Two boxes/multi-packs         Disposable       Four boxes/multi-packs         OR, Contact Lens Allowance:       \$105 toward any contact lenses.	
Lens Options! Polycarbonate Lenses	/3		Member Cost \$0 \$0 * The Davis Vision Collection is available at all participating retail providers and mos participating independent providers. * Including, but not limited to toric, multifocal and gas permeable contact lenses.	

New York State Health Insurance Program

/ Including, but not limited to toric, multifocal and gas permeable contact lenses. <sup>3</sup> For dependent children, monocular patients and patients with prescriptions of +/- 6.00 diopters or greater.

Please note: Your provider reserves the right to not dispense materials until all applicable member costs, fees and copayments have been collected. Contact lenses: Routine eye examinations do not include professional services for contact lens evaluations. If contact lenses are selected and fitted, they may not be exchanged for eyeglasses. May not be combined with other discounts or offers. Please be advised these lens options apply to in-network benefits.

## How can I contact Member Services?

Call 1-888-588-4823 for automated help 24/7. Live help is also available seven days a week: Monday-Friday, 8 a.m.-11 p.m. | Saturday, 9 a.m.-4 p.m. | Sunday, 12 p.m.-4 p.m. (Eastern Time). (TTY services: 1-800-523-2847.)

## What frames are in Davis Vision's Collection?

Our Collection offers a selection of fashionable designer frames, which are <u>covered in full</u>.Visit New York State Department of Civil Service website at <u>https://www.cs.ny.gov.</u> On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website. The Davis Vision Collection is available at all participating retail providers and most participating independent providers.

## When will I receive my eyewear?

Your eyewear will be delivered to your network provider within approximately seven calendar days of order receipt. Special prescriptions, lens coatings, provider frames or out-of-stock frames may delay the standard turnaround time.

## Do I need a claim form?

All available services must be obtained by an in-network provider.

## Can I split my benefits?

All services must be obtained at one time by an in-network provider.

### Can I use an out-of-network provider?

All available services must be obtained by an in-network provider.

## Are there any exclusions to the vision benefits?

Your vision plan does not cover medical treatment of eye disease or injury; vision therapy; special lens designs or coatings, other than those described herein; replacement of lost eyewear; non-prescription (plano) lenses; contact lenses and eyeglasses in the same benefit cycle; services not performed by licensed personnel; two pair of eyeglasses in lieu of bifocals.

## ADDITIONAL BENEFITS!

**One Year Breakage Warranty** Repair or replacement of your plan covered lenses and Collection frame.

For more details... about your vision benefits, patient rights and responsibilities, or more information about Davis Vision, visit the New York State Department of Civil Service website at <u>https://www.cs.ny.gov.</u> On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website or contact us at 1-888-588-4823.

## Police Investigators Association (PIA)



## Welcome to Davis Vision!

We are pleased to provide you with information on your vision benefit to help you care for your vision and eye health - a key part of overall health and wellness!



Using your benefits is easy! Visit New York State Department of Civil Service website at <u>https://www.cs.ny.gov.</u> On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website and click "Find a Provider," or call us at 1-888-588-4823.

**Make an appointment.** Tell your provider your benefit is administered by Davis Vision with coverage under the New York State Vision Plan. Provide your member ID number, name and date of birth, and do the same for your covered dependents seeking vision services. Your provider will take care of the rest!

## **New York State Vision Plan Benefits**



Benefit	Frequency Once every -	In-network member cost		In-network Coverage
Eye Examination	24 months (age 19 and over) 12 months (dependents to age 19)	\$0		ndard and Occupational (Employee only). On when professionally indicated.
Lenses \$0 Covered in full for			Covered in full for Sta	sion, bifocal, trifocal or post cataract lenses. ndard and Occupational (Employee only) dditional lens options and coatings.)
Frame	rame 24 months (age 19 and over) \$0 or 80% of balance over 12 months \$130 (dependents to age 19) OR, Frame Allowance:		(Standard and Occupational- Employee only)	Any frame from Davis Vision's Collection/1 \$130 toward any frame
24 months         Contact Lens       (age 19 and over)         Evaluation, Fitting       \$0         & Follow Up Care       12 months         (dependents to age 19)       \$0			Covered in full for Standard.	
Contact Lenses (in lieu of frame and lenses)24 months (age 19 and over)\$0 or 80% of balance over \$10512 months (dependents to age 19)			Covered in Full Contacts <sup>/2</sup> : Planned Replacement Disposable OR, Contact Lens Allowance:	From Davis Vision's Collection/1, up to: Two boxes/multi-packs Four boxes/multi-packs \$105 allowance toward any contacts from provider's supply, plus 20% off any balance.
Lens options and coatings! Tinting of Plastic Lenses <sup>/3</sup> Oversize Lenses <sup>/3</sup> Scratch-Resistant Coating <sup>/3</sup> Ultraviolet Coating <sup>/3</sup> Anti-Reflective Coating: Standard <sup>/3</sup>   Premium <sup>/3</sup>   Ultra <sup>/3</sup> Polycarbonate Lenses <sup>/3</sup> High-Index Lenses <sup>/3</sup> Progressive Lenses: Standard <sup>/3</sup>   Premium <sup>/3</sup> Polarized Lenses <sup>/3</sup> Photosensitive Lenses; Plastic <sup>/3</sup>   Glass <sup>/3</sup>			\$0 */ in \$0 *77 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	he Davis Vision Collection is available at all participating retail providers and most articipating independent providers. Including, but not limited to toric, multifocal and gas permeable contact lenses. These options are available under the Occupational benefit. Please note: Your provider reserves the right to not dispense materials until all pplicable member costs, fees and copayments have been collected. Contact enses: Routine eye examinations do not include professional services for ontact lens evaluations. If contact lenses are selected and fitted, they may not be exchanged for eyeglasses. Progressive lenses: If you are unable to adapt to progressive addition lenses you have purchased, conventional bifocals will e supplied at no additional cost. May not be combined with other discounts or fifters. Please be advised these lens options and copayments apply to in-network enefits.

## How can I contact Member Services?

Call 1-888-588-4823 for automated help 24/7. Live help is also available seven days a week: Monday-Friday, 8 a.m.-11 p.m. | Saturday, 9 a.m.-4 p.m. | Sunday, 12 p.m.-4 p.m. (Eastern Time). (TTY services: 1-800-523-2847.)

### What frames are in Davis Vision's Collection?

Our Collection offers a selection of fashionable designer frames, which are <u>covered in full</u>. Visit New York State Department of Civil Service website at <u>https://www.cs.ny.gov.</u> On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website. The Davis Vision Collection is available at all participating retail providers and most participating independent providers.

### How to access Student Verification Form?

Members can access the Student Verification Form by visiting the New York State Department of Civil Service website at <u>https://www.cs.ny.gov</u>. On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website and access under Benefits and Forms or by referring to your Vision Plan Booklet. Student verfication is required for all dependent children age 19 and over, unless permanently disabled.

### When will I receive my eyewear?

Your eyewear will be delivered to your network provider within approximately seven calendar days of order receipt. Special prescriptions, lens coatings, provider frames or out-of-stock frames may delay the standard turnaround time.

## Do I need a claim form?

Claim forms are only required if you visit an out-of-network provider. Claim forms are available by visiting the New York State Department of Civil Service website at <u>https://www.cs.ny.gov</u>. On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website and access under Benefits and Forms.

### Can I split my benefits?

You must select eyewear within 90 days of receiving an eye examination from a participating provider. Otherwise, your eyewear benefit will not be available until you are eligible for your next eye exam.

### Can I use an out-of-network provider?

Yes; however, you receive the greatest value by staying in-network. If you go out-of-network, pay the provider at the time of service, then submit a claim to Davis Vision for reimbursement, up to the following amounts: eye exam - \$20 | single vision lenses - \$22 | bifocal - \$30 | trifocal - \$40 | cataract lenses - \$35 | cataract bifocals - \$35 | frame - \$22 | elective contacts - \$184 | cataract contacts - \$184 | exam & contact lenses - \$200

### Are there any exclusions to the vision benefits?

Your vision plan does not cover medical treatment of eye disease or injury; vision therapy; special lens designs or coatings, other than those described herein; replacement of lost eyewear; non-prescription (plano) lenses; contact lenses and eyeglasses in the same benefit cycle; services not performed by licensed personnel; two pair of eyeglasses in lieu of bifocals.

## ADDITIONAL BENEFITS!

**One Year Breakage Warranty** Repair or replacement of your plan covered lenses and Collection frame.

Laser Vision Correction Up to 25% discount off participating provider's U&C or 5% off advertised special (whichever is lowest cost to the member).Visit New York State Department of Civil Service website at <a href="https://www.cs.ny.gov">https://www.cs.ny.gov</a>. On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website to locate a provider.

**Medical Exception Program** Under the Medical Exception Program, enrollees and covered dependents with a medical condition that may impact vision refraction, when referred by the physician caring for that medical condition, are eligible for an eve examination once every 12 months.

**For more details...** about your vision benefits, patient rights and responsibilities, or more information about Davis Vision, visit the New York State Department of Civil Service website at <u>https://www.cs.ny.gov.</u> On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website or contact us at 1-888-588-4823.

**Occupational Benefits** Occupational eyeglasses can be provided in addition to regular eyeglasses but are available to employees only – dependents are not eligible for this benefit. The occupational vision benefit is available only through a participating provider and in conjunction with your regular vision benefit once in any 24-month period. Sun-sensitive and polarized lens options are available for occupational eyeglasses.

# Public Employees Federation (PEF)

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**100% OF YOUR CALLS & CLAIMS ARE** 

PROUDLY ADMINISTERED IN THE USA

# **New York State Vision Plan Benefits**

Benefit	Frequency Once every -	In-network member cost	In-network Coverage		
Eye Examination	24 months (age 19 and over) 12 months (dependents to age 19)	\$0	Covered in full for Standard and Occupational (Employee only). Includes dilation when professionally indicated.		
Lenses	24 months (age 19 and over) 12 months (dependents to age 19)	\$0	Plastic or glass single vision, bifocal, trifocal or post cataract lenses. Covered in full for Standard and Occupational (Employee only) (See below for additional lens options and coatings.)		
Frame	24 months (age 19 and over) 12 months (dependents to age 19)	\$0 or 80% of balance over \$130	Covered in Full Frames: (Standard and Occupational - Employee only)	Any frame from Davis Vision's Collection <sup>/1</sup>	
			OR, Frame Allowance:	\$130 toward any frame.	
Contact Lens Evaluation, Fitting & Follow Up Care	24 months (age 19 and over) 12 months (dependents to age 19)	\$0	Covered in full for Standard.		
<b>Contact Lenses</b> (in lieu of frame and lenses)	24 months (age 19 and over) 12 months (dependents to age 19)	\$25 or \$45, plus 80% of balance over \$105/\$125	Covered in Full Contacts <sup>/2</sup> : Planned Replacement Disposable OR, Contact Lens Allowance:	From Davis Vision's Collection <sup>/1</sup> , after \$25 copay for conventional lenses, after \$45 copay for disposable lenses, up to: Two boxes/multi-packs Four boxes/multi-packs \$105 allowance toward any conventional contacts from provider's supply, \$125 allowance toward any disposable contact lenses, plus 20% off any balance.	

New York State Health Insurance Program

Lens options and coatings!	Member Cost
Tinting of Plastic Lenses/3	\$0
Oversize Lenses/3	\$0
Scratch-Resistant Coating/3	\$0
Ultraviolet Coating/3	
Anti-Reflective Coating: Standard <sup>/3</sup>   Premium <sup>/3</sup>   Ultra <sup>/3</sup>	\$35   \$48   \$60
Polycarbonate Lenses <sup>73</sup>	\$0
High-Index Lenses/3	\$50
Progressive Lenses: Standard/3   Premium/3	\$0   \$0
Polarized Lenses	\$60
Photosensitive Lenses; Plastic   Glass	\$50   \$0
Intermediate-Vision Lenses/3	
Blended Segment Lenses/3	\$0

<sup>1/</sup> The Davis Vision Collection is available at all participating retail providers and most participating independent providers. <sup>2'</sup> Including, but not limited to toric, multifocal and gas permeable contact lenses.

<sup>3'</sup> These options are available under the Occupational benefit.

Please note: Your provider reserves the right to not dispense materials until all applicable member costs, fees and copayments have been collected. Contact lenses: Routine eye examinations do not include professional services for contact lens evaluations. If contact lenses are selected and fitted, they may not be exchanged for eyeglasses. Progressive lenses: If you are unable to adapt to progressive addition lenses you have purchased, conventional bilocals will be supplied at no additional cost. May not be combined with other discounts or offers. Please be advised these lens options and copayments apply to in-network benefits.

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### Are there any exclusions to the vision benefits?

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## **ADDITIONAL BENEFITS!**

One Year Breakage Warranty Repair or replacement of your plan covered lenses and Collection frame.

Laser Vision Correction Up to 25% discount off participating provider's U&C or 5% off advertised special (whichever is lowest cost to the member). Visit New York State Department of Civil Service website at https://www.cs.ny.gov. On the Civil Service home page, select Benefit

Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website to locate a provider.

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Police Benevolent Association - Troopers (PBA-T)

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# **New York State Vision Plan Benefits**

Anti-Reflective Coating: Standard'3 | Premium'3 | Ultra'3 .....\$35 | \$48 | \$60

High-Index Lenses<sup>/3</sup> ...... \$0

Progressive Lenses: Standard'<sup>3</sup> | Premium'<sup>3</sup> ...... \$0 | \$0 Polarized Lenses'<sup>3</sup> ...... \$60

Photosensitive Lenses; Plastic/3 | Glass/3 ..... \$50 | \$0

Intermediate-Vision Lenses<sup>/3</sup>......\$30 Blended Segment Lenses<sup>/3</sup>......\$0

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Benefit	Frequency Once every -	In-network member cost		In-network Coverage
Eye Examination	24 months (age 19 and over) 12 months (dependents to age 19)	\$0	Covered in full for Standard and Occupational (Employee only). Includes dilation when professionally indicated.	
Lenses	24 months (age 19 and over) 12 months (dependents to age 19)	\$0	Plastic or glass single vision, bifocal, trifocal or post cataract lenses. Covered in full for Standard and Occupational (Employee only) (See below for additional lens options and coatings.)	
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Contact Lens Evaluation, Fitting & Follow Up Care	24 months (age 19 and over) 12 months (dependents to age 19)	\$0	Covered in full for Standard.	
<b>Contact Lenses</b> (in lieu of frame and lenses)	24 months (age 19 and over) 12 months (dependents to age 19)	\$0 or 80% of balance over \$105	Covered in Full Contacts <sup>/2</sup> : Planned Replacement Disposable OR, Contact Lens Allowance:	From Davis Vision's Collection/1, up to: Two boxes/multi-packs Four boxes/multi-packs \$105 allowance toward any contacts from provider's supply, plus 20% off any balance.
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Police Benevolent Association - Supervisors (PBA-S)

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PROUDLY ADMINISTERED IN THE USA

# **New York State Vision Plan Benefits**

Progressive Lenses: Standard/3 | Premium/3 ..... \$0 | \$0

Polarized Lenses<sup>/3</sup> ......\$60

Photosensitive Lenses; Plastic<sup>'3</sup> | Glass<sup>'3</sup> ...... \$50 | \$0 

Benefit	Frequency Once every -	In-network member cost		In-network Coverage
Eye Examination	24 months (age 19 and over) 12 months (dependents to age 19)	\$0		ard and Occupational (Employee only). when professionally indicated.
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Frame	24 months (age 19 and over) 12 months (dependents to age 19)	\$0 or 80% of balance over \$130	Covered in Full Frames: (Standard and Occupational- Employee only) OR, Frame Allowance:	Any frame from Davis Vision's Collection/1
Contact Lens Evaluation, Fitting & Follow Up Care	24 months (age 19 and over) 12 months (dependents to age 19)	\$0	Covere	ed in full for Standard.
<b>Contact Lenses</b> (in lieu of frame and lenses)	24 months (age 19 and over) 12 months (dependents to age 19)	\$0 or 80% of balance over \$105	Covered in Full Contacts <sup>/2</sup> : Planned Replacement Disposable OR, Contact Lens Allowance:	From Davis Vision's Collection <sup>/1</sup> , up to: Two boxes/multi-packs Four boxes/multi-packs \$105 allowance toward any contacts from provider's supply, plus 20% off any balance.
Oversize Lenses <sup>/3</sup> Scratch-Resistant Coa Ultraviolet Coating <sup>/3</sup> Anti-Reflective Coating Polycarbonate Lenses High-Index Lenses <sup>/3</sup>	es/3 ating/3 g: Standard/3   Premium/3   y <sup>3</sup>	Ultra/3	\$0 parti \$0 2 Inclu \$0 3 These \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	Davis Vision Collection is available at all participating retail providers and most icipating independent providers. ding, but not limited to toric, multifocal and gas permeable contact lenses. se options are available under the Occupational benefit. asse note: Your provider reserves the right to not dispense materials until all licable member costs, fees and copayments have been collected. Contact es: Routine eye examinations do not include professional services for fact lens evaluations. If contact lenses are selected and fitted, they may not exchanged for eyeglasses. Progressive lenses: If you are unable to adapt progressive addition, lenses you have purchased conventional bifreds will

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Yes; however, you receive the greatest value by staying in-network. If you go out-of-network, pay the provider at the time of service, then submit a claim to Davis Vision for reimbursement, up to the following amounts: eye exam - \$20 | single vision lenses - \$22 | bifocal - \$30 | trifocal - \$40 | cataract lenses - \$35 | cataract bifocals - \$35 | rame - \$22 | elective contacts - \$184 | cataract contacts - \$184 | exam & contact lenses - \$200

### Are there any exclusions to the vision benefits?

Your vision plan does not cover medical treatment of eye disease or injury; vision therapy; special lens designs or coatings, other than those described herein; replacement of lost eyewear; non-prescription (plano) lenses; contact lenses and eyeglasses in the same benefit cycle; services not performed by licensed personnel; two pair of eyeglasses in lieu of bifocals.

## ADDITIONAL BENEFITS!

**One Year Breakage Warranty** Repair or replacement of your plan covered lenses and Collection frame.

Laser Vision Correction Up to 25% discount off participating provider's U&C or 5% off advertised special (whichever is lowest cost to the member).Visit New York State Department of Civil Service website at <u>https://www.cs.ny.gov.</u> On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website to locate a provider.

**Medical Exception Program** Under the Medical Exception Program, enrollees and covered dependents with a medical condition that may impact vision refraction, when referred by the physician caring for that medical condition, are eligible for an eye examination once every 12 months.

**For more details...** about your vision benefits, patient rights and responsibilities, or more information about Davis Vision, visit the New York State Department of Civil Service website at <u>https://www.cs.ny.gov</u>. On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website or contact us at 1-888-588-4823.

**Occupational Benefits** Occupational eyeglasses can be provided in addition to regular eyeglasses but are available to employees only – dependents are not eligible for this benefit. The occupational vision benefit is available only through a participating provider and in conjunction with your regular vision benefit once in any 24-month period. Sun-sensitive and polarized lens options are available for occupational eyeglasses.

New York State Correctional Officers and Police Benevolent Association, Incorporated (NYSCOPBA) (Represented and Contract Affected)



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**Make an appointment.** Tell your provider your benefit is administered by Davis Vision with coverage under the New York State Vision Plan. Provide your member ID number, name and date of birth, and do the same for your covered dependents seeking vision services. Your provider will take care of the rest!

# **New York State Vision Plan Benefits**



Benefit	Frequency Once every -	In-network member cost		In-network Coverage
Eye Examination	24 months (age 19 and over) 12 months (dependents to age 19)	\$0	Covered in full. Includes dilation when professionally indicated.	
Lenses	24 months (age 19 and over) 12 months (dependents to age 19)	\$0	Plastic or glass single vision, bifocal, trifocal or post cataract lenses. Covered in full. (See below for additional lens options and coatings.)	
Frame	24 months (age 19 and over) 12 months (dependents to age 19)	\$0 or 80% of balance over \$100	Covered in Full Frames: OR, Frame Allowance:	Any (Basic) or (Standard) level frame from Davis Vision's Collection <sup>/1</sup> \$100 toward any frame
Contact Lens Evaluation, Fitting & Follow Up Care	24 months (age 19 and over) 12 months (dependents to age 19)	\$0	Covered in full for Standard.	
Contact Lenses (in lieu of frame and lenses)	24 months (age 19 and over) 12 months (dependents to age 19)	\$0 or 80% of balance over \$105	Covered in Full Contacts <sup>/2</sup> : Planned Replacement Disposable OR, Contact Lens Allowance:	From Davis Vision's Collection <sup>/1</sup> , up to: Two boxes/multi-packs Four boxes/multi-packs \$105 allowance toward any contacts from provider's supply, plus 20% off any balance.
Tinting of Plastic Lens Oversize Lenses Scratch-Resistant Coa Ultraviolet Coating	n Frames: Premier es ating g: Standard   Premium   L	Jltra	Member Cost \$40 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$35   \$48   \$60 \$0 <sup>3</sup> -\$30	<ul> <li><sup>17</sup> The Davis Vision Collection is available at all participating retail providers and most participating independent providers.</li> <li><sup>22</sup> Including, but not limited to toric, multifocal and gas permeable contact lenses.</li> <li><sup>35</sup> For dependent children, monocular patients and patients with prescriptions of +/- 6.00 diopters or greater.</li> </ul>

 Ultraviolet Coating
 \$0

 Anti-Reflective Coating: Standard | Premium | Ultra
 \$35 | \$48 | \$60

 Polycarbonate Lenses
 \$0<sup>3</sup>-\$30

 High-Index Lenses
 \$0

 Progressive Lenses: Standard | Premium
 \$0 | \$0

 Polarized Lenses
 \$60

 Photosensitive Lenses; Plastic | Glass
 \$0 | \$0

 Intermediate-Vision Lenses
 \$30

 Blended Segment Lenses
 \$0

Please note: Your provider reserves the right to not dispense materials until all applicable member costs, fees and copayments have been collected. Contact lenses: Routine eye examinations do not include professional services for contact lens evaluations. If contact lenses are selected and fitted, they may not be exchanged for eyeglasses. Progressive lenses: If you are unable to adapt to progressive addition lenses you have purchased, conventional bifcals will be supplied at no additional cost. May not be combined with other discounts or offers. Please be advised these lens options and copayments apply to in-network benefits.

## How can I contact Member Services?

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Members can access the Student Verification Form by visiting the New York State Department of Civil Service website at <u>https://www.cs.ny.gov.</u> On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website and access under Benefits and Forms or by referring to your Vision Plan Booklet. Student vertication is required for all dependent children age 19 and over, unless permanently disabled.

### When will I receive my eyewear?

Your eyewear will be delivered to your network provider within approximately seven calendar days of order receipt. Special prescriptions, lens coatings, provider frames or out-of-stock frames may delay the standard turnaround time.

### Do I need a claim form?

Claim forms are only required if you visit an out-of-network provider. Claim forms are available by visiting the New York State Department of Civil Service website at <u>https://www.cs.ny.gov</u>. On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website and access under Benefits and Forms.

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### Are there any exclusions to the vision benefits?

Your vision plan does not cover medical treatment of eye disease or injury; vision therapy; special lens designs or coatings, other than those described herein; replacement of lost eyewear; non-prescription (plano) lenses; contact lenses and eyeglasses in the same benefit cycle; services not performed by licensed personnel; two pair of eyeglasses in lieu of bifocals.

## ADDITIONAL BENEFITS!

**One Year Breakage Warranty** Repair or replacement of your plan covered lenses and Collection frame.

Laser Vision Correction Employees pay 10% of the discounted price up to a maximum member cost of \$200 once every five years. Dependents receive a discount up to 25% discount off participating provider's U&C or 5% off advertised special (whichever is lowest cost to the member). Visit New York State Department of Civil Service website at <u>https://www.cs.ny.gov</u>. On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website to locate a provider.

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# New York State Vision Plan Management Confidential (M/C), Participating Employer

(PE) and Unrespresented

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Make an appointment. Tell your provider your benefit is administered by Davis Vision with coverage under the New York State Vision Plan. Provide your member ID number, name and date of birth, and do the same for your covered dependents seeking vision services. Your provider will take care of the rest!

# **New York State Vision Plan Benefits**



Benefit	Frequency Once every -	In-network member cost	In-network Coverage	
Eye Examination	24 months (age 19 and over) 12 months (dependents to age 19)	\$0	Covered in full for Standard and Occupational (Employee only). Includes dilation when professionally indicated.	
Lenses	24 months (age 19 and over) 12 months (dependents to age 19)	\$0	Plastic or glass single vision, bifocal, trifocal or post cataract lenses. Covered in full for Standard and Occupational (Employee only) (See below for additional lens options and coatings.)	
Frame	24 months (age 19 and over) 12 months (dependents to age 19)	\$0 or 80% of balance over \$130	Covered in Full Frames: (Standard and Occupational - Employee Only) OR, Frame Allowance:	Any frame from Davis Vision's Collection/1 \$130 toward any frame.
Contact Lens Evaluation, Fitting & Follow Up Care	24 months (age 19 and over) 12 months (dependents to age 19)	\$0	Covered in full for Standard.	
Contact Lenses (in lieu of frame and lenses)	24 months (age 19 and over) 12 months (dependents to age 19)	\$25 or \$45, plus 80% of balance over \$105/\$125	Covered in Full Contacts <sup>/2</sup> : Planned Replacement Disposable OR, Contact Lens Allowance:	From Davis Vision's Collection/1, after \$25 copay for conventional lenses, after \$45 copay for disposable lenses, up to: Two boxes/multi-packs Four boxes/multi-packs \$105 allowance toward any conventional contacts from provider's supply, \$125 allowance toward any disposable contact lenses, plus 20% off any balance.
ens options and of Plastic Le	coatings! nses/3	1	Member Cost <b>\$0</b>	<sup>17</sup> The Davis Vision Collection is available at all participating retail providers and mos participating independent providers.

New York State Health Insurance Program

Lens options and coatings!	Member Cost
Tinting of Plastic Lenses <sup>/3</sup>	
Oversize Lenses <sup>/3</sup>	\$0
Scratch-Resistant Coating/3	\$0
Ultraviolet Coating/3	\$0
Anti-Reflective Coating: Standard <sup>/3</sup>   Premium <sup>/3</sup>   Ultra <sup>/3</sup>	\$35   \$48   \$60
Polycarbonate Lenses <sup>/3</sup>	\$0
High-Index Lenses/3	
Progressive Lenses: Standard/3   Premium/3	\$0   \$0
Polarized Lenses	\$60
Photosensitive Lenses; Plastic   Glass	\$50   \$0
Intermediate-Vision Lenses/3	\$30
Blended Segment Lenses <sup>/3</sup>	\$0

participating independent providers Including, but not limited to toric, multifocal and gas permeable contact lenses. <sup>3'</sup> These options are available under the Occupational benefit.

Please note: Your provider reserves the right to not dispense materials until all applicable member costs, fees and copayments have been collected. Contact lenses: Routine eye examinations do not include professional services for contact lens evaluations. If contact lenses are selected and fitted, they may not be exchanged for eyeglasses. Progressive lenses: If you are unable to adapt to progressive addition lenses you have purchased, conventional bifocals will be supplied at no additional cost. May not be combined with other discounts or offers. Please be advised these lens options and copayments apply to in-network benefits.

#### How can I contact Member Services?

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## When will I receive my eyewear?

Your eyewear will be delivered to your network provider within approximately seven calendar days of order receipt. Special prescriptions, lens coatings, provider frames or out-of-stock frames may delay the standard turnaround time.

## Do I need a claim form?

Claim forms are only required if you visit an out-of-network provider. Claim forms are available by visiting the New York State Department of Civil Service website at <a href="https://www.cs.ny.gov">https://www.cs.ny.gov</a>. On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website and access under Benefits and Forms.

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## Are there any exclusions to the vision benefits?

Your vision plan does not cover medical treatment of eye disease or injury; vision therapy; special lens designs or coatings, other than those described herein; replacement of lost eyewear; non-prescription (plano) lenses; contact lenses and eyeglasses in the same benefit cycle; services not performed by licensed personnel; two pair of eyeglasses in lieu of bifocals.

## ADDITIONAL BENEFITS!

**One Year Breakage Warranty** Repair or replacement of your plan covered lenses and Collection frame.

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Council 82 Security Supervisors Unit (Represented and Contract Affected)

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100% OF YOUR CALLS & CLAIMS ARE

PROUDLY ADMINISTERED IN THE USA

# **New York State Vision Plan Benefits**

Intermediate-Vision Lenses ......\$30

Blended Segment Lenses ...... \$0

Benefit	Frequency Once every -	In-network member cost		In-network Coverage
Eye Examination	24 months (age 19 and over) 12 months (dependents to age 19)	\$0	Covered in full. Includes dilation when professionally indicated.	
Lenses	24 months (age 19 and over) 12 months (dependents to age 19)	\$0	Plastic or glass single vision, bifocal, trifocal or post cataract lenses. Covered in full. (See below for additional lens options and coatings.)	
Frame	24 months (age 19 and over) 12 months (dependents to age 19)	\$0 or 80% of balance over \$100	Covered in Full Frames: OR, Frame Allowance:	Any (Basic) or (Standard) level frame from Davis Vision's Collection <sup>/1</sup> . \$100 toward any frame.
Contact Lens Evaluation, Fitting & Follow Up Care	24 months (age 19 and over) 12 months (dependents to age 19)	\$0		vered in full for Standard.
<b>Contact Lenses</b> (in lieu of frame and lenses)	24 months (age 19 and over) 12 months (dependents to age 19)	\$0 or 80% of balance over \$105	Covered in Full Contacts <sup>/2</sup> : Planned Replacement Disposable OR, Contact Lens Allowance:	From Davis Vision's Collection <sup>/1</sup> , up to: Two boxes/multi-packs Four boxes/multi-packs \$105 allowance toward any contacts from provider's supply, plus 20% off any balance.
Lens options and coatings! Davis Vision Collection Frames: Premier Tinting of Plastic Lenses Oversize Lenses Scratch-Resistant Coating Ultraviolet Coating Anti-Reflective Coating: Standard   Premium   Ultra Polycarbonate Lenses		\$0 \$0 \$0 \$0 \$0 \$0 \$0 \$35   \$48   \$60	<ul> <li><sup>1/2</sup> The Davis Vision Collection is available at all participating retail providers and most participating independent providers.</li> <li><sup>2/2</sup> Including, but not limited to toric, multifocal and gas permeable contact lenses.</li> <li><sup>3/2</sup> For dependent children, monocular patients and patients with prescriptions of +/- 6.00 diopters or greater.</li> </ul>	
Polycarbonate Lenses High-Index Lenses Progressive Lenses: Standard   Premium Polarized Lenses Photosensitive Lenses; Plastic   Glass		\$0 \$0   \$0 \$60 \$0   \$0	applicable member costs, fees and copayments have been collected. Contact lenses: Routine eye examinations do not include professional services for contact lens evaluations. If contact lenses are selected and fitted, they may not be exchanged for eyeglasses. Progressive lenses: If you are unable to adapt to progressive addition lenses you have purchased, conventional bifocals will be supplied at no additional cost. May not be combined with other discounts or offers. Please be advised these lens options and copayments apply to in-network benefits.	

benefits.

New York State Health Insurance Program

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Agency Law Enforcement Services Unit



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Benefit	Frequency Once every -	In-network member cost	In-network Coverage	
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Lenses	24 months (age 19 and over) 12 months (dependents to age 19)	\$0	Plastic or glass single vision, bifocal, trifocal or post cataract lenses. Covered in full. (See below for additional lens options and coatings.)	
Frame	24 months (age 19 and over) 12 months (dependents to age 19)	\$0 or 80% of balance over \$100	Covered in Full Frames: OR, Frame Allowance:	Any (Basic) or (Standard) level frame from Davis Vision's Collection <sup>/1</sup> . \$100 toward any frame.
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<b>Contact Lenses</b> (in lieu of frame and lenses)	24 months (age 19 and over) 12 months (dependents to age 19)	\$0 or 80% of balance over \$105	Covered in Full Contacts <sup>/2</sup> : Planned Replacement Disposable OR, Contact Lens Allowance:	From Davis Vision's Collection <sup>/1</sup> , up to: Two boxes/multi-packs Four boxes/multi-packs \$105 allowance toward any contacts from provider's supply, plus 20% off any balance.
Lens options and co	atings!			he Davis Vision Collection is available at all participating retail providers and most

Lens options and coatings!	Member Cost	<sup>1/</sup> The Davis Vision Collection is available at all participating retail providers and most
Davis Vision Collection Frames: Premier Tinting of Plastic Lenses	+ -	participating independent providers. <sup>27</sup> Including, but not limited to toric, multifocal and gas permeable contact lenses. <sup>3</sup> For dependent children, monocular patients and patients with prescriptions of
Oversize Lenses	\$0	+/- 6.00 diopters or greater.
Scratch-Resistant Coating		
Ultraviolet Coating		
Anti-Reflective Coating: Standard   Premium   Ultra		
Polycarbonate Lenses	\$0⁄³-\$30	Please note: Your provider reserves the right to not dispense materials until all applicable member costs, fees and copayments have been collected. Contact
High-Index Lenses		lenses: Routine eye examinations do not include professional services for
Progressive Lenses: Standard   Premium		contact lens evaluations. If contact lenses are selected and fitted, they may not be exchanged for eyeglasses. Progressive lenses: If you are unable to adapt
Polarized Lenses	+	to progressive addition lenses you have purchased, conventional bifocals will
Photosensitive Lenses; Plastic   Glass	\$0   \$0	be supplied at no additional cost. May not be combined with other discounts or offers. Please be advised these lens options and copayments apply to in-network
Intermediate-Vision Lenses		benefits.
Blended Segment Lenses	\$0	
SBCVX00200		

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Call 1-888-588-4823 for automated help 24/7. Live help is also available seven days a week: Monday-Friday, 8 a.m.-11 p.m. | Saturday, 9 a.m.-4 p.m. | Sunday, 12 p.m.-4 p.m. (Eastern Time). (TTY services: 1-800-523-2847.)

## What frames are in Davis Vision's Collection?

Our Collection offers a selection of fashionable designer frames, which are <u>covered in full</u>. Visit New York State Department of Civil Service website at <u>https://www.cs.ny.gov.</u> On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website. The Davis Vision Collection is available at all participating retail providers and most participating independent providers.

### How to access Student Verification Form?

Members can access the Student Verification Form by visiting the New York State Department of Civil Service website at <u>https://www.cs.ny.gov</u>. On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website and access under Benefits and Forms or by referring to your Vision Plan Booklet. Student verfication is required for all dependent children age 19 and over, unless permanently disabled.

### When will I receive my eyewear?

Your eyewear will be delivered to your network provider within approximately seven calendar days of order receipt. Special prescriptions, lens coatings, provider frames or out-of-stock frames may delay the standard turnaround time.

### Do I need a claim form?

Claim forms are only required if you visit an out-of-network provider. Claim forms are available by visiting the New York State Department of Civil Service website at <a href="https://www.cs.ny.gov">https://www.cs.ny.gov</a>. On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website and access under Benefits and Forms.

### Can I split my benefits?

You must select eyewear within 90 days of receiving an eye examination from a participating provider. Otherwise, your eyewear benefit will not be available until you are eligible for your next eye exam.

### Can I use an out-of-network provider?

Yes; however, you receive the greatest value by staying in-network. If you go out-of-network, pay the provider at the time of service, then submit a claim to Davis Vision for reimbursement, up to the following amounts: eye exam - \$16 | single vision lenses - \$14 | bifocal - \$23 | trifocal - \$32 | cataract lenses - \$35 | cataract bifocals - \$35 | frame - \$14 | elective contacts - \$184 | cataract contacts - \$184 | exam & contact lenses - \$200

### Are there any exclusions to the vision benefits?

Your vision plan does not cover medical treatment of eye disease or injury; vision therapy; special lens designs or coatings, other than those described herein; replacement of lost eyewear; non-prescription (plano) lenses; contact lenses and eyeglasses in the same benefit cycle; services not performed by licensed personnel; two pair of eyeglasses in lieu of bifocals.

## **ADDITIONAL BENEFITS!**

**One Year Breakage Warranty** Repair or replacement of your plan covered lenses and Collection frame.

Laser Vision Correction Employees pay 10% of the discounted price up to a maximum member cost of \$200 once every five years. Dependents receive a discount up to 25% discount off participating provider's U&C or 5% off advertised special (whichever is lowest cost to the member). Visit New York State Department of Civil Service website at <a href="https://www.cs.ny.gov">https://www.cs.ny.gov</a>. On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website to locate a provider.

**Medical Exception Program** Under the Medical Exception Program, enrollees and covered dependents with a medical condition that may impact vision refraction, when referred by the physician caring for that medical condition, are eligible for an eye examination once every 12 months.

**For more details...** about your vision benefits, patient rights and responsibilities, or more information about Davis Vision, visit the New York State Department of Civil Service website at <u>https://www.cs.ny.gov</u>. On the Civil Service home page, select Benefit Programs, then select NYSHIP Online and if prompted, choose your group and plan. Then select Other Benefits and then Vision Benefits and follow the links to the Davis Vision website or contact us at 1-888-588-4823.