DavisVision™

PARTNERS FOR HEALTH

davisvision.com/StateofTN | 1 (800) 208-6404

State of Tennessee your 2020 vision expanded plan

Frequency

Exam: Once Every Calendar Year
Lenses & lens upgrades: Once Every Calendar Year
Frame: Once Every Two (2) Calendar Years
Contacts, evaluation & fitting: Once every calendar year (In Lieu OF Eyeglass Lenses and/or Frames)

Sign up during annual enrollment

For more details about the plan, visit davisvision.com/StateofTN and enter your Client Code 8156 or call 1 (800) 208-6404.

Exams & Services

Eye Exam copay:
$10

Lenses

Standard Lens copay:
$0

Frame[1]

Allowance:
Visionworks[2]
Covered in full

Other locations
80% of Charge over $150

or

The Exclusive Collection copay:

Fashion	Designer	Premier
$0	$0	$0

Contacts[3]
in lieu of eyeglasses

Contact Lens Cost:

Conventional/Disposable
80% of Balance Cover $140

Visually Required[4]
Covered in Full

Evaluation, fitting & follow-up care:

Standard Lens	Specialty Lens
$50	$60

Find a network provider...

Just log on to davisvision.com/StateofTN and click “Find a Provider” to locate a provider near you including Visionworks.

Your Plan Details

Visit davisvision.com/StateofTN to find a list of in-network providers near you and access your benefit information.

The Exclusive Collection

The Exclusive Collection of frames is available at close to 9,000 locations across the U.S. Visit davisvision.com/StateofTN to browse frames and find a Collection near you.

Free breakage warranty

Your glasses are covered with our FREE one-year breakage warranty. Some limitations apply.

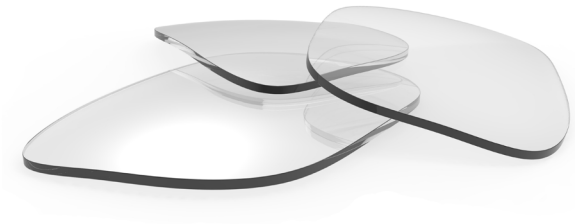
Copays for options & upgrades

Lens options

Clear Plastic Single-Vision, Bifocal, Trifocal or Lenticular Lenses (any RX) $0
Polycarbonate Lenses (Children / Adults) ..... $0/$30
High-Index Lenses 1.67 ..... $60
High-Index Lenses 1.74 ..... $120
Polarized Lenses ..... 80% of Charge up to $75
Progressive Lenses (Standard / Premium / Ultra / Ultimate) ..... $50 / $90 / $140 / $175
Anti-Reflective (AR) Coating (Standard / Premium / Ultra / Ultimate) ..... $40 / $55 / $69 / $85
Ultraviolet Coating $10
Tinting of Plastic Lenses (Solid / Gradient) $15
Plastic Photochromic Lenses (Transitions® Signature™) ..... 80% of Charge up to $70
Scratch-Resistant Coating $0
Premium Scratch-Resistant Coating $30
Scratch-Protection Plan (Single-Vision | Multifocal) ..... $20 | $40
Digital Single Vision Lenses $30
Trivex Lenses $50
Blue Light Filtering $15

Additional savings

Retinal imaging (Member charge) $39
Additional pairs of eyeglasses ..... 60% of charge[1]
Additional pairs of contact lenses ..... 80% of charge[1]



Employee rates	Monthly	Annually
Employee	$5.56	$66.72
Employee + Child(ren)	$11.12	$133.44
Employee + Spouse	$10.57	$126.84
Employee + Family	$16.35	$196.20

Out-of-network benefits

You may receive services from an out-of-network provider, although you will receive the greatest value and maximize your benefit dollars if you select a provider who participates in the network.

Out-of-network reimbursement schedule (up to)	
Eye Examination: $50	Progressive Lenses: $55
Frames: $75	Ultra Violet Coating: $10
Single-Vision Lenses: $35	Scratch Resistant Coating: $10
Bifocal: $55	Standard Anti-Refleftive Coating: $10
Trifocal Lenses: $70	Elective Contact Lenses: $55
Lenticular Lenses: $70	Visually Required Contacts: $200

1. Some limitations apply to additional discounts, discounts not applicable at all in-network providers. 2. Any frame at Visionworks covered in full with no member out-of-pocket cost excluding Maui Jim eyewear. 3. Contact lens coverage varies by product selection. 4. Visually Required contacts require prior approval. Davis Vision has done its best to accurately reflect plan coverage herein. If differences exist between this document and the plan certificate, the certificate will prevail.