

Clear Vision

An affordable vision insurance plan
for employer groups of all sizes



Underwritten by Madison National Life Insurance Company, Inc., a Wisconsin insurance company, in all states except New York. Standard Security Life Insurance Company of New York is the underwriting carrier in New York. Madison National and Standard Security are members of The IHC Group, an insurance organization composed of Independence Holding Company (NYSE: IHC) and its operating subsidiaries. The IHC Group has been providing life, health and stop-loss insurance solutions for nearly 30 years. For information about Independence Holding Company and The IHC Group, visit www.ihcgroup.com.



Why *Clear* Vision?

Regular eye exams are critical to the early detection of eye problems that can later be linked to serious health issues. Budgeting for eye care helps people receive the screenings they need to diagnose common eye diseases at their most treatable stage.



Clear Vision utilizes the outstanding quality, value and service of **Davis Vision**.

Davis Vision has been providing vision care services for more than 42 years and currently serves more than 55 million people. The Davis Vision network consists of nearly 30,000 providers throughout the country.

Easy online access

Through the Davis Vision website, employees have access to online features such as:

- ▶ Finding the nearest provider in the area
- ▶ Viewing benefits
- ▶ Checking employee eligibility
- ▶ Downloading claim forms
- ▶ Viewing exclusive frame options

Value-added benefits*

One-year breakage warranty

All plan 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 to in-network eyeglasses covered by the plan (spectacle lenses and Davis Vision Collection frames, or a national retailer's frames where the Davis Vision Collection is not displayed).

Replacement contact lens program

Davis Vision's proprietary Lens 1-2-3! mail order program offers the guaranteed lowest prices on contact lens replacements. Members can simply call 1-800-LENS-123 or visit www.lens123.com with their current prescription.

Laser vision correction discounts

Davis Vision members are entitled to savings of up to 25 percent off the provider's usual and customary fees, or a 5 percent discount on any advertised special through a network of physicians affiliated with Eye Centers of Excellence (some centers provide a flat fee equating to these discount levels).

Davis Vision's network is a blended network with a choice of all practice types including ophthalmologists, optometrists and many of the nation's premier retail centers. A large percentage of private practice providers also work in a retail/storefront environment. The following are some of the national and regional retailers that are typically included in a Davis Vision program:

Davis Vision	Binyon's Eye World	Visionworks	Stein Optical
Empire Vision Centers	Dr. Bizer's VisionWorld	Eye DRx	VisionWorld
Total Vision Care	Dr. Bizer's ValuVision	EyeMasters	Walmart Vision Center
Cambridge Eye Doctors	Doctor's ValuVision	Hour Eyes	
Douglas' Vision World	Doctor's Visionworks	Sam's Club	

For a full list of providers in your area, access our provider directory at www.davisvision.com, select "Members" and enter client code 7610.

* The value-added benefits are available through Davis Vision and are not part of the insurance policy.

Plan benefits	Clear 12	Clear 24
Frequency Exam with dilation as necessary Eyewear: Spectacle lenses Frame Contact lenses (in lieu of eyeglasses)	Benefits are available once every: 12 months 12 months 12 months 12 months	Benefits are available once every: 12 months 12 months 24 months 12 months

In-network services – Clear 12 and Clear 24

Copayments	A	B	C	Spectacle lenses	Additional copay per pair
	Eye examination Spectacle lenses ¹	\$0 \$0	\$10 \$10		
Frame In-network retail frame	\$100 allowance, then 20% discount ²			Choice of glass or plastic lenses	No additional copay
Exclusive collection of frames (in lieu of frame allowance):				Oversized lenses	No additional copay
Fashion (up to \$100 retail value)	No additional copay			Fashion and gradient tinting of plastic lenses	\$15
Designer (up to \$175 retail value)	\$15 additional copay			Glass-Grey #3 prescription sunglasses	\$15
Premier (up to \$225 retail value)	\$40 additional copay			Standard Progressive	\$65
				Premium Progressive	\$105
Contact lenses When selected in lieu of eyeglasses	\$100 allowance, then 15% discount ²			Photogrey extra (photosensitive) lenses	Glass - \$20/Plastic - \$70
Medically necessary (with prior approval)	No additional cost			Scratch resistant coating	\$20
				Anti-reflective coating (ARC)	
				Standard	\$40
				Premium	\$55
				Ultra	\$69
				Blended segment bifocal lenses	\$20
				Ultraviolet coating	\$15
				Polycarbonate	Children - no additional copay Adults - \$35
				High index lenses	\$60
				Polarized lenses	\$75
				Intermediate vision lenses	\$30

¹One copay applies for frame and lenses when purchased together. If the frame and lenses are purchased separately, a copay would apply for each.

²At Walmart locations, members will receive the full allowance towards Walmart's every day low prices. Additional discounts not applicable.

Out-of-network services – Benefit reimbursement – Clear 12 and Clear 24

Eye examination	Up to \$30
Spectacle lenses	
Single vision	Up to \$25
Bifocal	Up to \$35
Trifocal	Up to \$45
Lenticular	Up to \$60
Frame	Up to \$30
Contact lenses	
When selected in lieu of eyeglasses	Up to \$75
Medically necessary (with prior approval)	Up to \$225

Program features

24/7 access

Employees may review benefits, eligibility, locate providers and more at www.davisvision.com. An interactive voice response system also offers round-the-clock toll-free telephone access to benefit information.

Member savings

The Davis Vision program minimizes or eliminates out-of-pocket expenses for employees at the point of service. Members can use benefit allowances toward any eyewear desired but will see the greatest value when selecting the Davis Vision collections.

Rate stability

Rate stability over the company's history is indicative of their integrated cost control management techniques and strategies.

Exclusions and limitations

Benefits will not be paid for and the term "Covered Charges" will not include the following:

- For services or supplies not recommended by a provider.
- For periodic vision examinations, except as provided for in the Schedule of Benefits.
- For eye examinations required by an employer as a condition of employment.
- For services or materials provided in connection with special procedures such as orthoptics and visual training, or in connection with medical or surgical treatment.
- For lenses which do not provide vision correction.
- For charges for the replacement of lost or stolen lenses or frames within 24 months of service.
- For sickness or injury covered by a Workers' Compensation Act or other similar legislation.
- Incurred as a direct or indirect result of war (declared or undeclared).
- Incurred as a result of an intentionally self-inflicted injury or injury sustained while committing a crime.
- For services or supplies furnished to a Covered Person before the effective date of a Covered Person's Insurance under the Group Policy or after the date a Covered Person's Insurance ends.
- For services or supplies which are not generally accepted in the United States as being necessary and appropriate for the treatment of a patient's sickness or injury.
- For any medical treatment rendered outside the United States.
- For services rendered by practitioners who do not meet the definition of provider.
- For expenses covered by:
 - a. Any other group insurance except as provided in Section 7 – Coordination of Benefits.
 - b. A health maintenance organization or hospital or medical services prepayment plan available through an employer, union or association.
- For any expenses covered by any union welfare plan or governmental program or a plan required by law.
- For comprehensive low vision evaluations, subsequent follow-up visits following such evaluation or low vision aids for which prior approval was not obtained from us or our authorized administrator.
- For medically necessary contact lenses prescribed for a covered person affected with keratoconus for which prior approval was not obtained from us or our authorized administrator.

Important information

This Clear Vision brochure is intended as a summary outline of the features, plan provisions, benefits, exclusions, limitations and other information about the vision insurance policies underwritten by Madison National Life Insurance Company, Inc. (group vision policy form MNL GVIS-POL 1107) and Standard Security Life Insurance Company of New York (group vision policy form SSL GVIS-POL 1107). Policy provisions and availability may vary by state and by insurance company.

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