

City of Tallahassee your vision plan

Client code: 3671

Frequency

Exam: January 1

Lenses & lens upgrades: January 1

Frame: Every other January 1

Contacts, evaluation & fitting: January 1



Sign up during
open enrollment

For more details about the plan, visit davisvision.com/member and enter your Client Code or call 1 (877) 923-2847 and enter your Client Code when prompted.



Exams &
Services

Eye Exam copay:

\$10

Contacts evaluation, fitting & follow-up:

Collection

Non-Collection

Covered in full

15% savings²



Frame

Allowance:

Other locations

Visionworks¹

\$150

+*

\$200

+*

+Additional 20% **off** any overage.²

or

The Exclusive Collection copay:

Fashion

Designer

Premier

Covered in full

Covered in full

Covered in full



Lenses

Lens copay:

\$10



Contacts³
in lieu of glasses

Allowance:

\$150

+Additional 15% **off** any overage.²

or

The Exclusive Collection
of Contact Lenses:⁴

Covered in full

Using your client code

Log in using your client code (listed above) at davisvision.com/member 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 nearly 9,000 locations across the U.S. Log in 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.

Find a network provider...

Enter your client code in the "Member Sign In" section of our website at davisvision.com/member to locate a provider near you including Visionworks.

Options & upgrades

Lens options

Clear plastic single-vision, bifocal, trifocal or

lenticular lenses (any RX).....	\$0
Polycarbonate Lenses (Children / Adults).....	\$0 or \$30
High-Index Lenses 1.67.....	\$55
High-Index Lenses 1.74.....	\$120
Polarized Lenses.....	\$75
Progressive Lenses (Standard / Premium / Ultra / Ultimate).....	\$50 / \$90 / \$140 / \$175
Anti-Reflective (AR) Coating (Standard / Premium / Ultra / Ultimate).....	\$35 / \$48 / \$60 / \$85
Ultraviolet Coating.....	\$12
Tinting of Plastic Lenses (Solid / Gradient).....	\$0
Plastic Photochromic Lenses (Transitions® Signature™).....	\$65
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

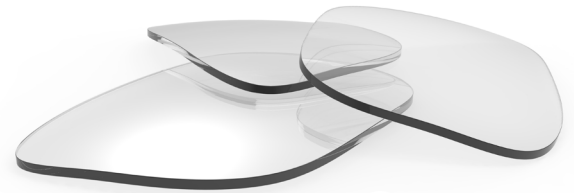
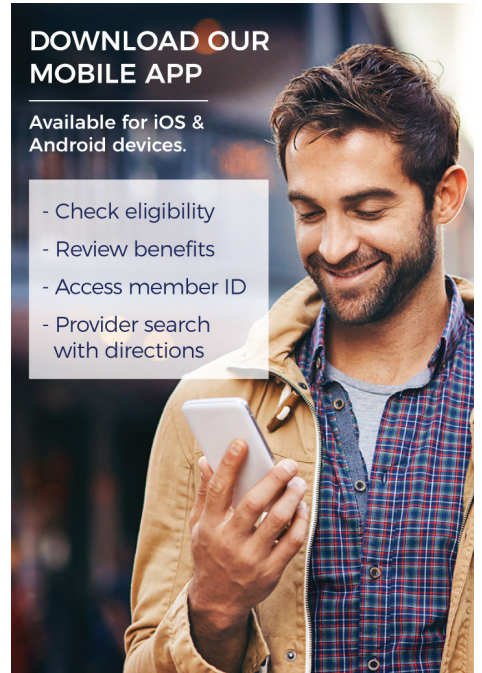
Additional savings

Retinal imaging (Member charge).....	\$39
Additional pairs of eyeglasses.....	30% discount ²
Laser Vision Correction One-Time/Lifetime Allowance.....	\$200

DOWNLOAD OUR MOBILE APP

Available for iOS & Android devices.

- Check eligibility
- Review benefits
- Access member ID
- Provider search with directions



Employee rates	Bi-Weekly	Monthly
Employee	\$2.14	\$4.28
Employee + Spouse	\$4.27	\$8.54
Employee + Family	\$7.97	\$15.94

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: \$40	Trifocal Lenses: \$80
Frame: \$50	Lenticular Lenses: \$100
Single-Vision Lenses: \$40	Elective Contact Lenses: \$105
Bifocal / Progressive Lenses: \$60	Visually Required Contacts: \$225

1. Excludes Maui Jim® eyewear. 2. Some limitations apply to additional discounts; discounts not applicable at all in-network providers. 3. Contact lens coverage varies by product selection. Visually Required contacts are covered in full with prior approval. 4. The Davis Vision Exclusive Collection of Contact Lenses is available at participating providers. Evaluation, fitting and follow-up care for Collection contacts are covered in full. Davis Vision has done its best to accurately reflect plan coverage herein. If differences exist between this document and the plan contract, the contract will prevail.



CITY OF
TALLAHASSEE

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!

If you are not currently enrolled, please visit our member site at davisvision.com or call 1.877.923.2847 and enter client code 3671 to locate providers or for additional information.



DavisVision™

Using your benefits is easy! Just log on to our Member site at davisvision.com and click "Find a Provider," or call us at 1.800.999.5431.

Make an appointment. Tell your provider you are a Davis Vision member with coverage through City of Tallahassee. 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!

Your Davis Vision Premier Plan Benefits

100% OF YOUR CALLS & CLAIMS ARE PROUDLY ADMINISTERED IN THE USA 

Benefit	Frequency Once every -	In-network Copay	In-network Coverage
Eye Examination	January 1	\$10	Covered in full. <i>Includes dilation when professionally indicated.</i>
Spectacle Lenses	January 1	\$10	Clear plastic lenses in any single vision, bifocal, trifocal or lenticular prescription. Covered in full. (See below for additional lens options and coatings.)
Frame	other January 1	\$0	<p>Covered in Full Frames: Any Fashion, Designer or Premier level frame from Davis Vision's Collection² (retail value, up to \$195).</p> <p>OR, Frame Allowance: \$150 toward any frame from provider plus 20% off any balance.¹ No copay required.</p> <p>OR, Visionworks Frame Allowance: \$200 allowance plus 20% off any balance toward any frame from a Visionworks family of store locations.⁵ No copay required.</p>
Contact Lens Evaluation, Fitting & Follow Up Care	January 1	\$0	<p>Davis Vision Collection Contacts: Covered in full.</p> <p>Standard Contacts: 15% discount¹</p> <p>Specialty Contacts³: 15% discount¹</p>
Contact Lenses (in lieu of eyeglasses)	January 1	\$0	<p>Covered in Full Contacts: From Davis Vision's Collection², up to: Planned Replacement Four boxes/multi-packs* Disposable Eight boxes/multi-packs*</p> <p>OR, Contact Lens Allowance: \$150 allowance toward any contacts from provider's supply plus 15% off balance.¹ No copay required.</p> <p>OR, Visually Required Contacts: Covered in full with prior approval.</p> <p><small>*Number of contact lens boxes may vary based on manufacturer's packaging.</small></p>

Significant savings on optional frames, lens types and coatings!

Member Price

Davis Vision Collection Frames: Fashion Designer Premier	\$0 \$0 \$0
Tinting of Plastic Lenses	\$0
Scratch-Resistant Coating	\$0
Premium Scratch-Resistant Coating	\$30
Ultraviolet Coating	\$12
Anti-Reflective Coating: Standard Premium Ultra Ultimate	\$35 \$48 \$60 \$85
Polycarbonate Lenses	\$0 ⁴ -\$30
High-Index Lenses 1.67 1.74	\$55 \$120
Progressive Lenses: Standard Premium Ultra Ultimate	\$50 \$90 \$140 \$175
Polarized Lenses	\$75
Photochromic Lenses (i.e. Transitions®, etc.) ⁶	\$65
Scratch Protection Plan: Single Vision Multifocal Lenses	\$20 \$40
Digital Single Vision Lenses	\$30
Trivex Lenses	\$50
Blue Light Filtering	\$15
Additional Savings!	
Retinal Imaging	\$39

¹ Some limitations apply to additional discounts, discounts not applicable at all in-network providers.

² The Davis Vision Collection is available at most participating independent provider locations. Collection is subject to change. Collection is inclusive of select toric and multifocal contacts.

³ Including, but not limited to toric, multifocal and gas permeable contact lenses.

⁴ For dependent children, monocular patients and patients with prescriptions of +/- 6.00 diopters or greater.

⁵ Enhanced frame allowance available at all Visionworks Locations nationwide Excludes Maui Jim eyewear.

⁶ Transitions® is a registered trademark of Transitions Optical Inc.

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. Any applicable fees above the evaluation and fitting allowance are the responsibility of the member. 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; however, your copayment is nonrefundable. May not be combined with other discounts or offers. Please be advised these lens options and copayments apply to in-network benefits.

Frequently Asked Questions

How can I contact Member Services?

Call 1.800.999.5431 for automated help 24/7.
(TTY services: 1.800.523.2847.)

What frames are in Davis Vision's Collection?

Our Collection offers a great selection of fashionable and designer frames, most of which are covered in full. No wonder 8 out of 10 members select a Collection frame. Log on to our member Web site at davisvision.com and take a look!

When will I receive my eyewear?

Your eyewear will be delivered to your network provider generally within five business 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 on our member Web site.

Can I split my benefits?

You may split your benefits by receiving your eye examination and eyeglasses or contact lenses on different dates or through different provider locations. To maximize your benefit value we recommend that all services be obtained from a network provider.

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 - \$40 | single vision lenses - \$40 | bifocal - \$60 | trifocal - \$80 | lenticular - \$100 | frame - \$50 | elective contacts - \$105 | Visually Required contacts - \$225.

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.

DAVIS VISION EXTRAS!

One Year Breakage Warranty Repair or replacement of your plan covered spectacle lenses, Collection frame or frame from a network retail location where the Collection is not displayed.

Greater Benefits Access a higher frame allowance by visiting a Visionworks family of store locations^{7/}.

Additional Savings Members will receive 50% off of additional complete pairs of eyeglasses and sunglasses at Visionworks and 30% off at other participating providers on the same transaction. Otherwise, a 20% discount off the provider's usual and customary rate is available. Contact lenses are available at a 10% discount.^{8/}

Laser Vision Correction Davis Vision provides you and your eligible dependents with the opportunity to receive discounted laser vision correction, often referred to as LASIK. For more information, visit www.davisvision.com. A one-time/lifetime allowance is available up to \$200.

Low Vision Services Comprehensive low vision evaluation once every five years and low vision aids up to the plan maximum. Covers up to four follow-up visits in five years.

Eye Health & Wellness Log on and learn more about your eyes, health and wellness; common eye conditions that can impair vision; and what you can do to ensure healthy eyes and a healthier life.

For more details... about your vision benefits, patient rights and responsibilities, or more information about Davis Vision, please log on to our member Web site or contact us at 1.800.999.5431.

Davis Vision has made every effort to correctly summarize your vision plan features herein. In the event of a conflict between this information and your organization's contract with Davis Vision, the terms of the contract will prevail.

^{7/}Some limitations apply to additional discounts, discounts not applicable at all in-network providers.

^{8/}Enhanced frame allowance available at all Visionworks Locations nationwide Excludes Maui Jim eyewear.

Benefits administered by Davis Vision, Inc.
Underwritten by Metropolitan Life Insurance Company, New York, NY