The Railroad Employees National Vision Plan

Effective January 1, 2013, your Vision Plan benefits will be provided by EyeMed Vision Care.

There is no change to the Plan design but there will be a few enhancements.

- A large national network, consisting of BOTH independent and retail-affiliated providers.
- 5 of the top 6 most preferred national retailers: LensCrafters, Pearle Vision, Sears Optical, Target Optical and JCPenney Optical.
- Employees will receive ID cards.
- Greater member discounts (40% vs. current 30%) on complete second pair purchases. There are no restrictions on how often or where a member can use the EyeMed additional pairs discount feature (applies at all in-network locations, at any time).
- During the first plan year (2013), each member can receive a \$60 discount on non-prescription Ray-Ban polarized sunglasses at a participating provider visit the "store locator" at <u>www.rayban.com</u> to locate a participating provider.
- A no-cost DISCOUNT PLAN coverage for early retirees will be introduced. This Discount Plan will not be a part of the Railroad Employees National Vision Plan but it will provide early retirees with savings on eye exams and material purchases at an EyeMed provider location.

In November you will receive a postcard from EyeMed announcing the change from VSP to EyeMed.

New for 2013: Introducing EyeMed Vision Care	When will this go into effect? Janay 7, 2033. Will my beenfus datage? The foundary on receive for vision are NOT changing. They will continue as outlined in the Railadd Employee National Vision Plan Summary Plan Description.	Evened Vision Care 400 Lucence Piece Marce, CH-6500	indicia
We encourage you to be proactive and take advantage of all the great benefits EyeMed offers.	Why the works to EgeNet17 StyleNet of the uncape lamitshift including StyleNet of the uncape lamitshift including Bares Capital lamit in the draw fuel lamitshift Bares Capital lamitshift have lamitshift and Capital lamitshift have lamitshift and the several purchase and 20% of the on-security of any lamitshift and including several purchase and 20% of the on-security of any lamitshift and the service and several purchases and 20% of the on-security of any lamitshift and the service and provide several several security of the several purchases and 20% of the on-security of the security of the security of the service protocol security of the security of the protocol security of the security of the security for the set yeard Values Care Did Card will be annoting	John Dol Smith Addinas Cirk Saler 201	
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In January, you will receive ID cards, information on participating providers in your areas, and a Summary of Benefits.

See the Summary of Benefits and a Q&A for more information about the transition to EyeMed.



Railroad Employees National Vision Plan

Vision Care Services	In-Network Member Cost	Out-of-Networl Reimbursemen	
Exam With Dilation as Necessary	\$0 Сорау	Up to \$35	
Contact Lens Fit and Follow-Up (Contact lens fit and	follow up visits are available once a comprehensive eye exam has been completed)		
Standard Contact Lens Fit & Follow-Up	Up to \$40	N/A	
Premium Contact Lens Fit & Follow-Up	10% off retail	N/A	
Retinal Imaging	Up to \$39	N/A	
Frames	\$0 Copay, \$115 Allowance; 20% off balance over \$115	Up to \$35	
Standard Plastic Lenses			
Single Vision	\$0 Copay	Up to \$25	
Bifocal	\$0 Copay	Up to \$40	
Trifocal	\$0 Copay	Up to \$55	
Lenticular	\$0 Copay	Up to \$80	
Standard Progressive Lens	\$50	Up to \$55	
Premium Progressive Lens (Add-on to Bifocal)	\$76 - \$88		
Tier 1	\$76	Up to \$55	
Tier 2	\$82	Up to \$55	
Tier 3	\$88	Up to \$55	
Tier 4	80% of charge less \$70 Allowance	Up to \$55	
Lens Options (paid by the member and added to the base p	rice of the lens)		
UV Treatment	\$15	N/A	
Tint (Solid and Gradient)	\$15	N/A	
Standard Plastic Scratch Coating	\$15	N/A	
Standard Polycarbonate	\$30	N/A	
Standard Polycarbonate—Kids under 19	\$0	N/A	
Standard Anti-Reflective Coating	\$39	N/A	
Premium Anti-Reflective Coating [△]	\$51 - \$62	14/7	
Tier 1	\$51	N/A	
Tier 2	\$62	N/A	
Tier 3		N/A	
Photochromic/Transitions	80% of charge	N/A N/A	
	\$75		
Polarized	20% off retail price	N/A	
Other Add-Ons and Services	20% off retail price	N/A	
Contact Lenses (allowance includes materials only)			
Conventional	\$0 Copay, \$105 Allowance; 15% off balance over \$105	Up to \$105	
Disposable	\$0 Copay, \$105 Allowance; plus balance over \$105	Up to \$105	
Medically Necessary	\$0 Copay, Paid in full	Up to \$210	
Laser Vision Correction			
LASIK or PRK from U.S. Laser Network	15% off retail price or 5% off promotional price	N/A	
Additional Pairs Discount	Members also receive a 40% discount off complete pair eyeglass purchase and 15% discount off conventional contact lenses once the funded benefit has been used.		
Frequency			
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Want to learn more?

• For a complete list of providers near you, use our Provider Locator on www.eyemedvisioncare.com/railroad or call 1-855-212-6003.

• For Lasik providers, call 1-877-5LASER6.

Additional Discounts and Features:

40% off additional • eyewear purchases.

- 20% off non-prescription . sunglasses.
- 20% off remaining . balance beyond plan coverage.
- Laser vision correction— • 15% off the retail price or 5% off the promotional price for Lasik or PRK procedures.

Examination

Frame

Lenses or Contact Lenses

Once every 12 months Once every 24 months Once every 24 months





Railroad Employees National Vision Plan Transition to EyeMed – Q&A

1. Why is this change to EyeMed being made?

There are several advantages to transitioning to EyeMed:

- EyeMed offers a large national network with BOTH independent and retail-affiliated providers to better serve all consumer preferences
- The network includes 5 of the top 6 most preferred national retailers: LensCrafters, Pearle Vision, Sears Optical, Target Optical and JCPenney Optical
- Additional plan discounts will be made available to you which DO NOT impact plan cost:
 - Unlimited 40% discount off additional complete pairs at any network location, anytime the largest and most flexible discount in the industry
 - Discounted fixed cost on lens options not covered under the plan—saving members up to 65% off retail pricing
 - o 20% discount on items not covered by the plan
 - o 15% discount on LASIK or PRK services; (or 5% off promotional pricing)
 - o 20% off any frame balance
 - o 15% off any contact lens balance for conventional contact lenses
- EyeMed is also offering a special savings opportunity for members on polarized Ray-Ban sunglasses. During the first plan year (2013), each member can receive a \$60 discount on nonprescription Ray-Ban Polarized sunglasses at a participating provider – visit <u>www.rayban.com</u> to find a participating provider. Information regarding this offering will be contained within the ID card packet received in early January.

2. What will change as a result of this switch to EyeMed?

Benefits will be managed exactly as outlined in the Railroad Employees National Vision Plan Summary Plan Description.

3. How much will members pay for vision care services with EyeMed?

Costs to members will remain comparable to the costs in the current plan.

4. Can I see the same eye doctor I use today?

The EyeMed network will offer more flexibility to members because it offers a mix of independent and retail providers. The majority of providers in the current plan will be available in the new EyeMed plan but the transition will result in some provider changes. While you can use your benefits at an out-of-network provider, to gain the maximum benefit from your coverage, check to ensure your provider is within EyeMed's network. Find an in-network provider by reviewing the list that will be mailed to your home with your I.D. Cards, or use the provider locator on eyemedvisoncare.com/railroad or call the Customer Care Center at 855-212-6003. The EyeMed network is so comprehensive that 97% of our members choose to stay in-network for their vision care.

5. How do I obtain a list of EyeMed providers?

If you need to locate a particular EyeMed provider call 855-212-6006 or access the website at <u>www.eyemedvisioncare.com/railroad</u> and click on "Provider Locator."

6. May I see one doctor for my examination and have my glasses made through another doctor or optical shop?

Yes. The first network provider that is seen will obtain an authorization to service you for your exam. If you choose to use another provider for purchasing your eyeglass or contact lens materials, take your prescription provided from your first provider to your visit with the second provider. That provider will take care of the rest. Note: If your provider is not in network, you are responsible for paying the provider in full and submitting itemized receipts to EyeMed for reimbursement. For details about your Out-of-Network reimbursements, please review your Railroad Employees National Vision Plan Summary Plan Description (SPD).

If you do wish to have your prescription filled with a doctor other than the one who performed the examination, please check with the second doctor's office to assure that they will fill another doctor's prescription.

7. What if I have an emergency, such as lost, stolen, or broken glasses?

EyeMed does not provide a separate or additional benefit for emergencies; however, additional discounts are available after your initial benefit has been exhausted. This includes 40% off of a complete pair of eyeglasses or a 15% discount on conventional contact lenses. Please call 855-212-6003 for details on whether you are still eligible for services. EyeMed will review your records and determine if your eligibility for services is still available. Note that if you are traveling, the new retail locations (LensCrafters, Pearle, Sears, Target, JC Penny) will have your prescription on file for convenient eye ware replacement.

8. What if I am dissatisfied with an EyeMed doctor or the materials I receive through an EyeMed doctor?

If you have received services or materials that are unsatisfactory, please contact EyeMed's Customer Care Center immediately. EyeMed will review the situation and follow-up with resolution to the concern.

9. What benefits are provided when I choose to see a non-EyeMed provider?

When seeing a non-EyeMed provider, pay your bill in full for the services you receive. You will be reimbursed according to a schedule of allowances outlined in the Railroad Employees National Vision Plan SPD. There is no guarantee that the reimbursement schedule will cover the total cost of service and materials. After receiving services, simply submit your claim. If eligible, your reimbursement for covered items will be returned to you.

10. If I elect to see a non-EyeMed provider, how do I file a claim for the Out-of-Network benefits?

When seeing a non-EyeMed provider, pay your bill in full for the services you receive. Complete the EyeMed Out-of-Network claim form and attach your itemized receipts. The claim form can be located by registering and logging into the website at <u>www.eyemedvisioncare.com/railroad</u> or by calling the Customer Care Center at 855-212-6003.

Allow at least 14 calendar days to process your claim once it is received by EyeMed. Your claim will be processed in the order it is received. A check and/or explanation of benefits will be mailed within seven (7) calendar days of the date your claim is processed. To determine how much will be reimbursed, review the SPD.

11. If I am eligible for both examination and materials, but I choose to have only an examination, can I utilize my materials benefit later in the same year?

Yes. However, keep in mind that you will be eligible for your next examination 12 months from the examination service date. When you receive your materials (lenses and frame <u>or</u> contact lenses), the next date of eligibility for materials will be 24 months from the material service date.

12. When seeing an EyeMed doctor, what type of frame selections will be covered in full by EyeMed?

When seeing an EyeMed doctor, you have the option to choose any frame in the EyeMed doctor's office. The plan will provide a \$115 allowance towards the retail price of the frame. If you choose a frame with a retail price exceeding the \$115 retail allowance, you will receive a 20% discount on that remaining amount and will be responsible for the remaining balance after the 20% discount has been applied.

13. What are some of the cosmetic options for which I can expect to incur out-of-pocket expenses?

Some examples of cosmetic options are: Scratch Coating, Anti-Reflective Coating, UV Coating, and Progressive Lenses.

14. Are prescription safety glasses covered under the Railroad Employees National Vision Plan?

There is no separate or additional benefit for prescription safety glasses under the Railroad Employees National Vision Plan.

15. Am I eligible for contacts under this plan?

Yes. You may choose to obtain contact lenses instead of glasses. The plan provides an allowance of \$105 toward contact lens materials, evaluation fee and fitting costs, and will cover the standard examination in full. You are eligible for contact lenses at the same frequency that the plan allows for spectacle lenses, and you would use up your eligibility for lenses and frame for this eligibility period.

When seeing a non-EyeMed provider, your full \$105 allowance will be used toward the contact lens materials. Your fit and follow-up exam fees are separate from this allowance. If your contact lens fitting is classified by the provider as "standard," you will be responsible for the first \$40 of your fitting fees and the rest will be covered. If your contact lens fitting is classified by the provider as "premium," you will receive 10% off of the retail price for this contact lens exam fitting. Examples of premium fitting would be for multiple contacts or toric contact lens to correct astigmatism.

16. Do I need to use the full contact lens allowance when I first purchase contact lenses or can I use a portion of the allowance initially and then a portion later?

Yes. You will need to use the full allowance for your contact lens materials upon the initial purchase as there will not be a remaining balance to use later.

17. What types of contact lenses may I receive through EyeMed?

As long as your contact lenses meet the minimum prescription requirement, your allowance remains the same for all types of contacts. If contacts are selected which exceed the \$105 allowance, you are responsible for the payment of any remaining balance.

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