



OPEN ENROLLMENT 2018 Summary of Benefits

Your Vision Benefits

Santa Rosa BOCC

Humana.com

Santa Rosa BOCC

Vision care services	If you use an IN-NETWORK provider (Member cost)	If you use an OUT-OF-NETWORK provider (Reimbursement)
Exam with dilation as necessary • Retinal imaging ¹	\$10 Up to \$39	Up to \$30 Not covered
Contact lens exam options ² • Standard contact lens fit and follow-up • Premium contact lens fit and follow-up	Up to \$55 10% off retail	Not covered Not covered
Frames ³	\$150 allowance 20% off balance over \$150	\$65 allowance
Standard plastic lenses ⁴ • Single vision • Bifocal • Trifocal • Lenticular	\$15 \$15 \$15 \$15	Up to \$25 Up to \$40 Up to \$60 Up to \$100
Covered lens options ⁴ • UV coating • Tint (solid and gradient) • Standard scratch-resistance • Standard polycarbonate - adults • Standard polycarbonate - children <19 • Standard anti-reflective coating • Premium anti-reflective coating - Tier 1 - Tier 2 - Tier 3 • Standard progressive (add-on to bifocal) • Premium progressive - Tier 1 - Tier 2 - Tier 3 - Tier 4 • Photochromatic / plastic transitions • Polarized	\$15 \$15 \$15 \$40 \$0 \$45 Premium anti-reflective coatings as follows: \$57 \$68 80% of charge \$15 Premium progressives as follows: \$110 \$120 \$135 \$90 copay, 80% of charge less \$120 allowance \$75 20% off retail	Not covered Not covered Not covered Not covered Not covered Not covered Premium anti-reflective coatings as follows: Not covered Not covered Not covered Up to \$40 Premium progressives as follows: Not covered Not covered Not covered Not covered Not covered Not covered
Contact lenses ⁵ (applies to materials only) • Conventional • Disposable • Medically necessary	\$150 allowance, 15% off balance over \$150 \$150 allowance \$0	\$104 allowance \$104 allowance \$200 allowance

Custom Humana Vision

Vision care services	If you use an IN-NETWORK provider (Member cost)	If you use an OUT-OF-NETWORK provider (Reimbursement)
Frequency		
• Examination	Once every 12 months	Once every 12 months
• Lenses or contact lenses	Once every 12 months	Once every 12 months
• Frame	Once every 24 months	Once every 24 months
Diabetic Eye Care: care and testing for diabetic members		
• Examination	\$0	Up to \$77
- Up to (2) services per year		
• Retinal Imaging	\$0	Up to \$50
- Up to (2) services per year		
• Extended Ophthalmoscopy	\$0	Up to \$15
- Up to (2) services per year		
• Gonioscopy	\$0	Up to \$15
- Up to (2) services per year		
• Scanning Laser	\$0	Up to \$33
- Up to (2) services per year		
Optional benefits		
• Polycarbonate Lenses for Children <19	Provides for standard polycarbonate lens with \$0 copay. Not available in AK, CT, ID, & OH.	

¹ Member costs may exceed \$39 with certain providers. Members may contact their participating provider to determine what costs or discounts are available.

² Standard contact lens exam fit and follow up costs and premium contact lens exam discounts up to 10% may vary by participating provider. Members may contact their participating provider to determine what costs or discounts are available.

³ Discounts may be available on all frames except when prohibited by the manufacturer.

⁴ Lens option costs may vary by provider. Members may contact their participating provider to determine if listed costs are available.

⁵ Plan covers contact lenses or frames, but not both.

Additional plan discounts

- Member may receive a 20% discount on items not covered by the plan at network Providers. Members may contact their participating provider to determine what costs or discounts are available. Discount does not apply to EyeMed Provider's professional services, or contact lenses. Plan discounts cannot be combined with any other discounts or promotional offers. Services or materials provided by any other group benefit plan providing vision care may not be covered. Certain brand name Vision Materials may not be eligible for a discount if the manufacturer imposes a no-discount practice. Frame, Lens, & Lens Option discounts apply only when purchasing a complete pair of eyeglasses. If purchased separately, members receive 20% off the retail price.
- Members may also receive 15% off retail price or 5% off promotional price for LASIK or PRK from the US Laser Network, owned and operated by LCA Vision. Since LASIK or PRK vision correction is an elective procedure, performed by specialty trained providers, this discount may not always be available from a provider in your immediate location.

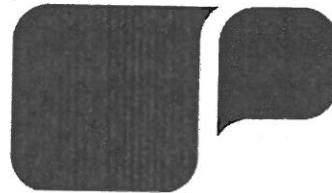
Limitations and Exclusions:

In addition to the limitations and exclusions listed in your "Vision Benefits" section, this policy does not provide benefits for the following:

1. Any expenses incurred while you qualify for any worker's compensation or occupational disease act or law, whether or not you applied for coverage.
2. Services:
 - That are free or that you would not be required to pay for if you did not have this insurance, unless charges are received from and reimbursable to the U.S. government or any of its agencies as required by law;
 - Furnished by, or payable under, any plan or law through any government or any political subdivision (this does not include Medicare or Medicaid); or
 - Furnished by any U.S. government-owned or operated hospital/institution/agency for any service connected with sickness or bodily injury.
3. Any loss caused or contributed by:
 - War or any act of war, whether declared or not;
 - Any act of international armed conflict; or
 - Any conflict involving armed forces of any international authority.
4. Any expense arising from the completion of forms.
5. Your failure to keep an appointment.
6. Any hospital, surgical or treatment facility, or for services of an anesthesiologist or anesthesiologist.
7. Prescription drugs or pre-medications, whether dispensed or prescribed.
8. Any service not specifically listed in the Schedule of Benefits.
9. Any service that we determine:
 - Is not a visual necessity;
 - Does not offer a favorable prognosis;
 - Does not have uniform professional endorsement; or
 - Is deemed to be experimental or investigational in nature.
10. Orthoptic or vision training.
11. Subnormal vision aids and associated testing.
12. Aniseikonic lenses.
13. Any service we consider cosmetic.
14. Any expense incurred before your effective date or after the date your coverage under this policy terminates.
15. Services provided by someone who ordinarily lives in your home or who is a family member.
16. Charges exceeding the reimbursement limit for the service.
17. Treatment resulting from any intentionally self-inflicted injury or bodily illness.
18. Plano lenses.
19. Medical or surgical treatment of eye, eyes, or supporting structures.
20. Replacement of lenses or frames furnished under this plan which are lost or broken, unless otherwise available under the plan.
21. Any examination or material required by an Employer as a condition of employment.
22. Non-prescription sunglasses.
23. Two pair of glasses in lieu of bifocals.
24. Services or materials provided by any other group benefit plans providing vision care.
25. Certain name brands when manufacturer imposes no discount.
26. Corrective vision treatment of an experimental nature.
27. Solutions and/or cleaning products for glasses or contact lenses.
28. Pathological treatment.
29. Non-prescription items.
30. Costs associated with securing materials.
31. Pre- and Post-operative services.
32. Orthokeratology.
33. Routine maintenance of materials.
34. Refitting or change in lens design after initial fitting, unless specifically allowed elsewhere in the certificate.
35. Artistically painted lenses.

Vision health impacts overall health

Routine eye exams can lead to early detection of vision problems and other diseases such as diabetes, hypertension, multiple sclerosis, high blood pressure, osteoporosis, and rheumatoid arthritis ¹.



¹ Thompson Media Inc.

Humana Vision products insured by Humana Insurance Company, Humana Health Benefit Plan of Louisiana, The Dental Concern, Inc. or Humana Insurance Company of New York.

This is not a complete disclosure of the plan qualifications and limitations. Specific limitations and exclusions as contained in the Regulatory and Technical Information Guide will be provided by the agent. Please review this information before applying for coverage.

NOTICE: Your actual expenses for covered services may exceed the stated cost or reimbursement amount because actual provider charges may not be used to determine insurer and member payment obligations.

Humana



How to view a copy of your vision identification (ID) card

What do I do if I need to visit my provider and I haven't received my Humana member ID card?

You will have access to view and print your vision ID card via the website.

Here's how

- Go to **Humana.com** and sign in/register for MyHumana. Have your Humana member ID card or Social Security number available.
- Click "Access your ID Card" under "Tools & Forms" in the lower right of your MyHumana home page or in the page's footer under "Tools & Resources."
- A new window will appear with links to the ID card or proof of coverage.
- Print if desired.



Call Member Services at
1-877-398-2980 for
assistance or more information

Humana

Humana.com

Provider Directory

Humana.com



Get the most up-to-date information.

Follow these simple steps to find a Humana Vision provider:

1. Under "Find a doctor" on the home page, click on "Search."

Find a doctor

Quickly locate a doctor, hospital, dentist, vision provider or pharmacy.

→ Search

2. Under "Search Type," select "Vision" and click on "Go."

Medical
Dental
✓ Vision
Pharmacy

→ Go

Select "Vision coverage through your employer" and click on "Go."

Vision care

To start search, choose your plan.

- ☒ Vision coverage through your employer or purchased on your own
- ☐ Vision coverage through Medicare Supplemental Benefits (EyeMed)

→ Go

Continue

Select Humana Vision (Humana Insight Network)

Select a plan

Please choose a vision plan. You will then be able to select from a list of available providers in your area.

Vision Plans

- **Humana Vision (Humana Insight Network)**
- Vision Care Plan (VCP)
- EyeMed Plan (Optimum, Focus, Advantage, Exom Plus)

Enter Zip code and select Get Results

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Begin Your Search

ZIP Code

What else is important?

Get Results Advanced Search

* Required Field

Find a Provider

Find a network provider near you by searching below. To find a participating provider, complete either the full street address or the zip code, then click Search.

Always call ahead to confirm a provider's participation in your plan. Make sure to say you're a Humana Vision member to ensure you receive your maximum benefits. Not all providers participate in every plan. If you aren't yet enrolled in a Humana Vision plan, please keep in mind your actual network may vary from what appears on our locator.

Humana Vision members should use us to access the exact list of available providers. Even if a provider is displayed on this site, you should call ahead to confirm the provider still accepts your plan.

Eye exams available by Independent Business of Optometry or next to LensCrafters, Pearle Vision, Sears Optical and Target Optical in most states. Doctors in some states are employed by the location. In California, optometrists are not employed by LensCrafters, Sears Optical.

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Your search results will display.

Humana Vision Lasik



Opening doors to better vision for thousands of people — with affordable Lasik¹ procedures

Network doctors can help you understand these new procedures and provide access to our network of Lasik providers.

You may also use independent Lasik provider-network doctors to receive a 10 percent discount from usual and customary prices and pay no more than \$1,800 per eye for conventional Lasik and \$2,300 per eye for custom Lasik.

¹Laser-assisted in-situ keratomileusis

²If qualified as a Lasik candidate by the network doctor

The Lasik program is a discount only for Humana Vision members and is not a covered benefit.

Reduced fees

Lasik procedures are available if you're nearsighted or have astigmatism and wear glasses or contacts.² We have contracted with many well-known facilities and eye doctors to offer these procedures at substantially reduced fees.

You can take advantage of these low fees when procedures are done by network providers. The network locations listed below offer the following prices (per eye):

	Custom**
TLC 1-888-358-3937	\$1,295 \$1,895*
LasikPlus 1-866-757-8082	\$1,895* LasikPlus free enhancements for life
QualSight LASIK 1-855-456-2020	\$1,320 \$1,995* with QualSight Lifetime Assurance Plan

*With IntraLase™

**Pricing varies by section, by procedure offered by the provider you choose, and by options in your area. Not all locations offer fixed pricing. Please call the provider for details.

Easy access to service

During your comprehensive eye health examination, your doctor can determine if you're a candidate for Lasik. If you qualify, the doctor can also make arrangements for the procedure with one of the centers that participates in this program.

Your Humana Vision ID card verifies your eligibility for Lasik discounts. You can find a list of providers online at **Humana.com** or by calling a Customer Care specialist at **1-877-398-2980**.

This discount cannot be combined with any other discount or promotional offer. The Humana Vision Lasik program is not affiliated with any medical or health plan. All pricing listed is per eye.

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Humana.com

MyHumana Mobile app

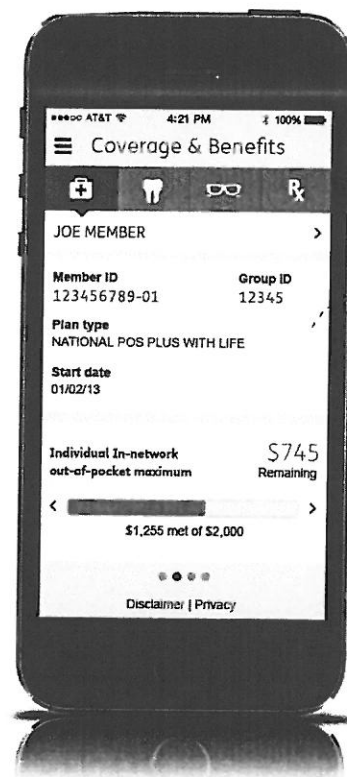
"Now we go where you go"

Access your vision information anytime, anywhere!

Whether you prefer downloading a mobile application, using your mobile device or receiving text messages, you have the ability to manage your vision plan virtually anywhere, anytime.

Use the MyHumana Mobile app and website to:

- View vision claims
- View your plans and coverage details
- View your ID card
- Locate vision providers in your Humana Insight network



Download the Mobile App:

Download the MyHumana Mobile app from your app store. Search "MyHumana" in the Google Play or App Store.



From your mobile device's browser:

You can visit MyHumana from your mobile device's browser. To get started, go to **Humana.com** and sign-in.

Text message alerts*

On the MyHumana Mobile app:

1. Register or Sign in
2. Click on the Menu icon
3. Select Text Alerts
4. Register and verify your Mobile #
5. Select the alerts you want to receive

On Humana.com:

1. Register or Sign in
2. Click on Account settings & preferences
3. Select Edit your preferences
4. Select Mobile from the tab
5. Register and verify your Mobile #
6. Select the alerts you want to receive

*Message and data rates may apply.

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Humana.com

GLASSES.COM

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Employees have a realistic way to try on glasses digitally:



Find frames
Thousands of styles rendered instantly in 3D



See from any angle
See how frames look from side to side



Share on Social Media
Get the opinions of family friends

In-network now means online

We're changing the way benefits work - because online purchases of prescription glasses is projected to increase by 15% over the next 10 years.¹ And now that Glasses.com is in our network, members can go online to buy glasses anytime, from anywhere. And the best part is that they can use their in-network benefits.

It's easy:

- Members can find a pair they love from thousands of name-brand frames
- Snap and send a picture of the prescription - or have Glasses.com call the provider for it
- Lenses available for most prescriptions (including progressives and multifocals)
- Orders fulfilled and shipped the following day - and it's free!
- All supported by the award winning² photorealistic and geometrically accurate 3D virtual "try-on" app for iPad and iPhone

Try glasses on at home

Risk Free



We'll send members frames they like in their prescription



They can wear them for 15 days



They can keep them - or send them back - all with free shipping

See how our vision is changing reality
Download the app or visit Glasses.com today

¹Estin & Co, 2013 estimates and analysis; Essilor International

²2014 Cannes Lions Festival, Bronze Award for "Creative Use of Technology"



Members can now use their contact lens allowance online

We know that even though members are busy, they always have a mobile device ready or a computer nearby. That's why they can order contact lenses online using ContactsDirect when they need to - without leaving their homes. And the best part is that they can use their in-network benefits to make sure they're getting the best price around.

Plus, members can be sure that they can find what they need because ContactsDirect stocks the best-selling brands. The site also offers a best-in-class user experience that allows users to view their eligibility and available allowance (with application directly in their shopping cart). All with fast, free shipping!

And don't worry, for members who still prefer to visit their eye doctor in person to purchase contacts lenses, nothing has changed. ContactsDirect is just one more way we're helping members see life to the fullest.

Check out this new, online in-network benefit by visiting us at www.contactsdirect.com

It's an easy ordering process:

1

Go to
contactsdirect.com

2

Select your lenses from a wide selection of top selling brands

3

In-network vision benefits instantly apply to your purchase price

4

Contact lenses will ship as soon as the prescription is verified- most even ship that same day

ContactsDirect will abide by state laws that pertain to contact lens.

Members whose prescriptions are more than a year old will need an updated prescription to make an online or in-person purchase using their benefits.

Discrimination is against the law

Humana Inc. and its subsidiaries comply with applicable federal civil rights laws and do not discriminate on the basis of race, color, national origin, age, disability or sex. Humana Inc. and its subsidiaries do not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

Humana Inc. and its subsidiaries provide:

- Free auxiliary aids and services, such as qualified sign language interpreters, video remote interpretation and written information in other formats to people with disabilities when such auxiliary aids and services are necessary to ensure an equal opportunity to participate.
- Free language services to people whose primary language is not English when those services are necessary to provide meaningful access, such as translated documents or oral interpretation.

If you need these services, call **1-877-320-1235** or send an email to **accessibility@humana.com**, or if you use a **TTY**, call **711**.

If you believe that Humana Inc. and its subsidiaries have failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with:

Discrimination Grievances

P.O. Box 14618

Lexington, KY 40512-4618

If you need help filing a grievance, call **1-877-320-1235** or if you use a **TTY**, call **711**.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue, SW

Room 509F, HHH Building

Washington, D.C. 20201

1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>

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