UnitedHealthcare Vision™

BENEFIT SUMMARY BROCHURE Customer Service: 800-638-3120 Provider Locator: 800-839-3242 www.myuhcspecialtybenefits.com

American Council of Engineering Companies



UnitedHealthcare Vision has been trusted for more than 40 years to deliver affordable, innovative vision care solutions to the nation's leading employers through experienced, customer-focused people and the nation's most accessible, diversified vision care network.

Covered in Full (after applicable copays) In-Network Benefits:

Comprehensive Exam

Lenses

Standard Single Vision

Standard Lined Bifocal

Standard Lined Trifocal

Lens Options

Standard Scratch Resistant Coating

Progressives

Anti-Reflective

Polycarbonate

Frame

Contact Lenses (in lieu of eyeglasses)

Elective

Necessary*

Copays for in-network services

Comprehensive Exam	\$ 10.00	
Materials	\$ 10.00	

Benefit Frequency

(in lieu of eye glasses)

Comprehensive Exam	12 months
Spectacle Lenses	12 months
Frames	24 months
Contact Lenses	12 months

Out of Network Reimbursement Network Copays do not apply		
Comprehensive Exam	\$	40.00
Lenses		
Single Vision	\$	43.00
Bifocal	\$	57.00
Trifocal	\$	66.00
Lenticular	\$	80.00
Frames	\$	50.00
Contact Lenses in lieu of eyeglasses		
Elective	\$	120.00

You do not need to submit a claim for In-Network benefits. However, you must submit a claim to UnitedHealthcare Vision for benefit reimbursement for Out-of-Network services.

210.00

Frame Benefit

Private Practice Provider - \$50 wholesale allowance (approximate retail value of \$120-\$150)

Retail Chain Provider - \$130 retail frame allowance

Network Contact Lens Benefit

Covered-in-full contact lenses in lieu of eyeglasses.

The covered-in-full contact lens benefit at network providers includes fitting/evaluation, contacts, and two follow-up visits (after applicable copay). For those who choose disposable lenses, up to 6 boxes are included when obtained from a network provider.

All other elective contacts

A \$150 allowance is applied toward the fitting/evaluation fees and purchase of contact lenses outside of Spectera's covered-infull contacts (materials copay does not apply). Toric, gas permeable, and bifocal contacts are all examples of contacts that areoutside of our covered-in-full selection.

Necessary contact lenses*

Covered-in-full (after applicable copay)

Laser Vision Benefit

United Healthcare Vision has partnered with the Laser Vision Network of America (LVNA) to provide our members with access to discounted laser correction providers. 1-877-28-SIGHT

Necessary'



Provider network

UnitedHealthcare Vision®

There's always a provider in sight.

ne size does not fit all. That's why we created a network that features both private practice and retail providers to allow you a choice for your eye care. Some people prefer the personal service of a private practice provider, especially if they have a longstanding relationship with a family eye doctor. Others prefer the convenience of a retail chain provider. UnitedHealthcare Vision offers a diverse network of over 31,000 providers, including both private practice and leading retail chain providers. Our network allows you to pick the doctor that matches your lifestyle and eye care needs.

In addition to our many private practice doctors, UnitedHealthcare Vision partners with more than 100 national retail chains throughout the country. In fact, UnitedHealthcare Vision's network includes more than half of the top 50 retail chains in the country.¹

Simply log on to www.myuhcvision.com to locate a provider near you.

Contracted retail chain providers*

ABBA Eyecare Advance Eyecare Center Allegany Optical Alvernon Optical American Vision Center America's Best Contacts & Eyeglasses Bard Optical Binyon's Bizer's Brown's Optical C & B Optical One Cambridge Eye Doctors Co/op Optical Colony Opticians Columbia Presbyterian Opticians Connersville Eye Center Crown Optical Cunningham Optical One Davis Duehr Dean Doctors On Sight Doctor's Value Vision Doctor's Vision Works Dr. Tavel Optical **Duling Optical ECCA Empire Vision Center Enfield Opticians Exact Eve Care** Eye Boutique Eye Care Associates Eye Care in Salem

Eye Care One Eye Care Plus Eye Doctors Optical Outlets Eye Drx Eve Mart eyecarecenter, ODPA Eyeglass World **Evemart Express** EyeMart Optical Evemasters Eves First FirstSight Vision Service For Eves Fritz & Hawley Vision Center, Inc. General Vision Services H. Rubin Halpern Eye Associates Harley Henion Optician, Inc. Harvey & Lewis Heartland Vision Henry Ford OptimEyes Herslof Optical Horizon Eyecare Horner-Rausch Optical Hour Eyes Inno Vision Jack Kahn's Westgate VisionCenter Kennedy & Perkins Opticians Kent Optical Leitchfield Eye Care

Longe Optical Louisville Optometric Centers Mid-West Eye Consultants Midwest Vision Centers Monfried Optical My Eye Dr. National Optometry Nationwide Vision O.H. Gerry Optical One Hour Optical Optical Fashions Optitech Optiview Optivision Ossip Optometry Page Optical Park Lane Eye Care Portland Eye Center Professional Opticians Real Optics Riverfront Optical Rose Optical One Rosin Eyecare Rx Optical Sam's Club Schaff Vision Care See, Inc Sharon Optical Shawnee Optical Shopko

Singer Optical Site for Sore Eyes Smeelink Optical Standard Optical Stein Optical Sterling & Cohen's SVS Vision Texas State Optical The Eye Center Group The Optical Center The Optical Shoppe Thoma Sutton Optical United Optical Vision Care Plus Vision Center II Vision City Vision First Vision Mart Vision Point Vision Works Vision World Vogue Vision Center Walsh & Massari of Meriden Whylie Eye Care Winchester Eye Center Wisconsin Vision Wise Eyes Optical Younkers Vision Center Walmart

or call UnitedHealthcare Vision's provider locator at 1.800.839.3242 for the most up-todate list of participating providers. Although UnitedHealthcare Vision contracts with

UnitedHealthcare Vision contracts with each of these retail chain providers, not all locations within each retail chain participate in UnitedHealthcare Vision's network.

¹Vision Monday, May 2009

* Please visit our Web site at

www.myuhcvision.com

For information, contact a sales representative or visit www.myuhcvision.com.

UnitedHealthcare Vision® coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by Spectera, Inc., United HealthCare Services, Inc. or their affiliates. Plans sold in Texas use policy form number VPOL.06 and associated COC form number VCOC.INT.06.TX.

UnitedHealthcare Vision®