



Cedarburg School District

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www.cedarburg.k12.wi.us

Challenging Students to Achieve Their Goals and Dreams

MEMORANDUM

Date: November 14, 2022

To: Employees Eligible for Vision Insurance

From: Ben Irwin, Director of Business Services

Subject: Vision Insurance Information and Annual Open Enrollment Notification

Employee paid, voluntary vision insurance will remain with EyeMed for the period of 01/01/2023 – 12/31/2023. There will be no change in plan design or premium rates.

Open enrollment for 2023 vision benefits will be held from 11/14/22 – 11/28/22. Vision insurance elections made during Open Enrollment will become effective 01/01/2023 and will remain in effect for the entire 2023 year. You cannot change your benefit selections again until the next Open Enrollment unless you experience a “qualifying status change”. Qualifying status changes are included at the end of this document. **It is important that all employees remember they must notify the payroll department and complete enrollment forms within 30 days of the qualifying event.**

NOTE: If you are currently on our plan and do not report a change in status we will keep you enrolled at your current status.

Employees are eligible to enroll in insurance coverage effective with their hire date and are covered through the month they resign. Employee premium share deductions are taken from the last day of the month payroll.

Premium Information 01/01/23 – 12/31/23

- The current employee premium share is 100%.
- The premium share amounts are included in the chart below.

Plan Type	Total Monthly Premium	Employee Share per Last Day Payroll
Single	\$9.36	\$9.36
Family	\$23.87	\$23.87

Summary of Benefits

Attached you will find a summary of vision benefits. If you want more detail about your coverage, please call EyeMed at 866-800-5457 or visit EyeMed's website at www.eyemed.com.

Qualifying Status Changes

Following IRS regulations, you can make changes consistent with your status change within 30 days of the date the status change occurred. In most circumstances, you cannot change the type of coverage (e.g. your plan) but you may modify the level of coverage (e.g. add a child following a birth or adoption).

As Detailed in Cafeteria Plan Document:

(a) By Participant.

- (1) HIPAA Special Enrollment Rights.
- (2) Change in Status.
 - (A) Legal Marital Status.
 - (B) Number of Dependents.
 - (C) Employment Status.
 - (D) Dependent Satisfies or Ceases to Satisfy Eligibility Requirements.
 - (E) Residence.
 - (F) Adoption Assistance.
- (3) Judgment, Decree, or Order. A Participant may modify an election pursuant to a judgment, decree, or order resulting from a divorce, legal separation, annulment, or change in legal custody (including a qualified medical child support order as defined in ERISA section 609) that requires accident or health coverage for a Participant's child or for a foster child who is a dependent of the Participant; provided that the modification:
 - (A) changes the Participant's election to provide coverage for the child if the order requires coverage for the child under the Plan; or
 - (B) cancels coverage for the child if the order requires the spouse, former spouse, or other individual to provide coverage for the child; and that coverage is, in fact, provided.
- (4) Entitlement to Medicare or Medicaid.
- (5) Significant Cost or Coverage Changes.
- (6) FMLA.

If you have any questions regarding vision insurance, please contact Lisa Bublitz, Payroll/Benefits Coordinator or me as follows:

Lisa Bublitz at lbublitz@cedarburg.k12.wi.us or (262) 376-6113

Ben Irwin at birwin@cedarburg.k12.wi.us or (262) 376-6114



Cedarburg School District

SUMMARY OF BENEFITS

Additional discounts

40% OFF

Complete pair of prescription eyeglasses

20% OFF

Non-prescription sunglasses

These discounts are not insured benefits and are for in-network providers only. For vision plans with qualified materials benefit only. Not applicable for exam only vision plans.

Take a sneak peek before enrolling

- You're on the Insight Network
- For a complete list of in-network providers near you, use our Enhanced Provider Locator on eyemed.com or call 1.866.804.0982
- For LASIK providers, call 1.800.988.4221

VISION CARE SERVICES	IN-NETWORK MEMBER COST	OUT-OF-NETWORK MEMBER REIMBURSE
EXAM SERVICES		
Exam	\$0 copay	Up to \$40
Retinal Imaging	Up to \$39	Not covered
CONTACT LENS FIT AND FOLLOW-UP		
Fit and Follow-up - Standard	\$40	Not covered
Fit and Follow-up - Premium	10% off retail price	Not covered
FRAME		
Any available frame at provider location	\$0 copay; 20% off balance over \$130 allowance	Up to \$91
STANDARD PLASTIC LENSES		
Single Vision	\$0 copay	Up to \$30
Bifocal	\$0 copay	Up to \$50
Trifocal	\$0 copay	Up to \$70
Lenticular	\$0 copay	Up to \$70
Progressive - Standard	\$55 copay	Up to \$50
Progressive - Premium Tier 1	\$85 copay	Up to \$50
Progressive - Premium Tier 2	\$95 copay	Up to \$50
Progressive - Premium Tier 3	\$110 copay	Up to \$50
Progressive - Premium Tier 4	\$175 copay	Up to \$50
LENS OPTIONS		
Anti Reflective Coating - Standard	\$45 copay	Up to \$5
Anti Reflective Coating - Premium Tier 1	\$57 copay	Up to \$5
Anti Reflective Coating - Premium Tier 2	\$68 copay	Up to \$5
Anti Reflective Coating - Premium Tier 3	\$85 copay	Up to \$5
Photochromic - Non-Glass	\$75	Not covered
Polycarbonate - Standard	\$40	Not covered
Polycarbonate - Std - Dependent Children	\$0 copay	Up to \$5
Scratch Coating - Standard Plastic	\$15	Not covered
Tint - Solid or Gradient	\$15	Not covered
UV Treatment	\$15	Not covered
All Other Lens Options	20% off retail price	Not covered
CONTACT LENSES		
Contacts - Conventional	\$0 copay; 15% off balance over \$130 allowance	Up to \$91
Contacts - Disposable	\$0 copay; plus balance over \$130 allowance	Up to \$91
Contacts - Medically Necessary	\$0 copay; Paid-In-Full	Up to \$210
OTHER		
Hearing Care from Amplifon NetworkCare	Discounts on hearing exam and aids; call 1.877.203.0675	Not covered
Lasik or PRK from U.S. Laser Network	15% off retail or 5% off promo price; call 1.800.988.4221	Not covered
FREQUENCIES (Plan allows member to receive either contacts and frame, or frames and lens services)		
Exam	Once every plan year	
Frame	Once every plan year	
Lenses	Once every plan year	
Contacts	Once every plan year	

QL-0000013707

Premium progressives and premium anti-reflective designations are subject to annual review by EyeMed's Medical Director and are subject to change based on market conditions. Fixed pricing is reflective of brands at the listed product level. All providers are not required to carry all brands at all levels. Benefits are not provided from services or materials arising from: 1) Orthoptic or vision training, subnormal vision aids and any associated supplemental testing; Aniseikonic lenses; 2) Medical and/or surgical treatment of the eye, eyes or supporting structures; 3) Any eye or Vision Examination, or any corrective eyewear required by a Policyholder as a condition of employment; Safety eyewear; 4) Services provided as a result of any Workers' Compensation law, or similar legislation, or required by any governmental agency or program whether federal, state or subdivisions thereof; 5) Plano (non-prescription) lenses; 6) Non-prescription sunglasses; 7) Two pair of glasses in lieu of bifocals; 8) Services or materials provided by any other group benefit plan providing vision care 9) Services rendered after the date an Insured Person ceases to be covered under the Policy, except when Vision Materials ordered before coverage ended are delivered, and the services rendered to the Insured Person are within 31 days from the date of such order. 10) Lost or broken lenses, frames, glasses, or contact lenses will not be replaced except in the next Benefit Frequency when Vision Materials would next become available. Benefits may not be combined with any discount, promotional offering, or other group benefit plans. Standard/Premium Progressive lens not covered-fund as a Bifocal lens. Standard Progressive lens covered-fund Premium Progressive as a Standard. Benefit allowance provides no remaining balance for future use within the same benefit year. Fees charged for a non-insured benefit must be paid in full to the Provider. Such fees or materials are not covered.

Underwritten by Fidelity Security Life Insurance Company of Kansas City, Missouri, except in New York. Fidelity Security Life Policy number VC-19, form number M-9083. This is a snapshot of your benefits. The Certificate of Insurance is on file with your employer.

Get more and see more with EyeMed



72%
AVERAGE
SAVINGS



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EyeMed members choose from the right mix of thousands of providers— independent eye doctors, your favorite retail stores and everything in between. Find your ideal fit at eyemed.com or the EyeMed Members App.



CREATE AN ACCOUNT

Get special offers with an account on eyemed.com. Enter your email, choose a password and sign up for emailed savings. Log in 24/7 to view your benefit details or health and wellness information.



MOBILIZE YOUR BENEFITS

The EyeMed Members App makes your benefits easy to understand—and even easier to use. Find an eye doctor near you, schedule an appointment and manage your vision benefits.

on eye exams and glasses for EyeMed members*

Learn more about enrolling in EyeMed vision benefits at enroll.eyemed.com and see more of the good stuff

*Based on a sample transaction on the Insight network with a covered exam and eyewear benefits

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Welcome to EyeMed!

When you have questions about your EyeMed vision care plan, we know you need answers fast! So, in addition to the ongoing, day-to-day service you receive from your EyeMed account manager, below are other ways to logon, call or email us!

EyeMed Websites

Client/Member Website: eyemed.com
Secured for enrolled members/clients.

Members can quickly:

- Locate providers
- View benefits
- Print ID cards
- View claim history

Benefit Administrators can quickly:

- Update membership
- View invoices & rosters

Wellness Website: eyesiteonwellness.com

In or Out-of-Network Claims

- **In-Network:**
No claim forms are needed for In-Network services.
 - **Out-of-Network:**
OON claim forms are available on the eyemed.com website. Please mail the completed form and a copy of the paid itemized receipt to EyeMed Vision Care for reimbursement.
 - **Address:**
EyeMed Vision Care
Attn: OON Processing PO Box 8504
Mason, Ohio 45040
- Email: oonclaims@eyemed.com

Membership Eligibility

Make real-time membership updates (adds, terms, changes) via our Online Group Management System @ eyemed.com under the Benefit Administrator section.

The most secure way to send your eligibility files is through SFTP. If you need to email your eligibility file, please send a strong password protected zipped file to the address below. Be sure to send the password in a separate email.

eyemedmembers@eyemed.com

Customer Care Center

Locate in-network providers, listen to member benefit information, speak to a customer service representative, etc.

Contact us at 1-866-800-5457

Monday – Saturday	Sunday
7:30 am - 11:00 pm EST	11:00 am - 8:00 pm EST

For more on how to use your benefit, Check out

discovereyemed.com/roadmap



The biggest network and the most choice. Because more is more.

Smart tools for savvy shoppers

KNOW BEFORE YOU GO

With EyeMed's Know Before You Go out-of-pocket cost estimator, you can get a feel for what you might pay before you even step foot into a store or doctor's office. The tool includes simple, clear definitions of common products and add-ons, all while calculating a range of costs with each click. So you can feel confident from check-in to check-out.

1

Log into eyemed.com and find our Know Before You Go out-of-pocket cost estimator.

2

Pick the type of exam you'll need. Just need glasses or contacts? Take a look at Step 3.

3

Choose from a variety of lens types, options and add-ons. Plus, get detailed descriptions of each product so you feel confident in your choices.

4

The best part? You get a range of costs based on your choices and applied vision benefits. We do the math so you stay in-the-know before you go.



Register on eyemed.com to try Know Before You Go today



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CHOOSE A DOC

EyeMed members choose from the right mix of thousands of providers—independent eye doctors, your favorite retail stores and everything in between. Find your ideal fit at eyemed.com or the EyeMed Members App.



CREATE AN ACCOUNT

Get special offers with an account on eyemed.com. Enter your email, choose a password and sign up for emailed savings. Log in 24/7 to view your benefit details or health and wellness information.



MOBILIZE YOUR BENEFITS

The EyeMed Members App makes your benefits easy to understand—and even easier to use. Find an eye doctor near you, schedule an appointment and manage your vision benefits.

on eye exams and glasses
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Learn more about enrolling
in EyeMed vision benefits
at enroll.eyemed.com and
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*Based on a sample transaction on the Insight network
with a covered exam and eyewear benefits

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EyeMed Progressive and Anti-Reflective Tier Classifications 2019

Progressive Classification*
Standard Progressives as Follows:
<p>Adaptar / Adatar Short / Essilor Computer / Essilor Interview / Natural / Navigator / Navigator Short / Ovation / Super No Line / Amplitude / Amplitude Mini / GP / HoyaLux Tact / Seiko AF 2 / Seiko AF 2 Mini / Seiko Diamond Clear Mini / Synchrony Access / AO Compact / Gradal RD / Instinctive / Sola Max / VIP / Zeiss Business / Freedom 5 / Freedom Fit / Freedom ID / Outlook / Shoreview / Shoreview Mini / Unique Softwear / Synchrony Easy M / Synchrony Easy View / Synchrony Access / MVC Standard Progressive</p>
Premium Progressives as Follows:
<p>TIER 1 - Adaptar Digital / Adaptar Digital Short / Natural Digital / Ovation Digital / Small Fit / Small Fit Digital / Amplitude BKS / Amplitude Mini BKS / Amplitude IQ / Amplitude IQ Mini / GP Wide / Tact BKS / Navigator FBS / Navigator Short FBS / Proceed II / Proceed III / Gradal Top / Instinctive HD / AO Easy / Synchrony / Synchrony Easy S / Adage / Concise / Illumina / Image / Image Wrap / Novel / Novella / Precise / Precise Short / Xplorer / Shamir 1st Pal / MVP / Premium Progressive / Short Fit Progressive / LC Design 1.0</p>
<p>TIER 2 - Ideal / Ideal Short / Varilux Comfort 2 / Varilux Comfort 2 Short / Varilux Comfort DRx / Varilux Comfort DRx Short / Summit CD / Summit ECP / Seiko PC Wide Computer / Succeed / Succeed WS / Element / Compact Ultra / GT2 / GT2 Short / Sola One / Zeiss Choice / Zeiss Digital / Zeiss Digital Wrap / DST Custom Plus / HD Workspace / Kodak Precise PB / Kodak Precise PB Short / IOT Everyday / TruClear / Nikon Presio I Digital / Instinctive Performance / Synchrony Easy View HD / Synchrony Easy View M HD / Synchrony Easy View S HD / Synchrony Easy Adapt / Synchrony Access HD / Synchrony Easy Wear / Signet Armorlite DirecTek / Signet Armorlite DirecTek Short / Workspace</p>
<p>TIER 3 - Definity / Definity Short / Ideal Advanced / Ideal Advanced Wrap / Varilux Comfort W2+ / Varilux Comfort W2+ Fit / Varilux Ellipse / Varilux Panamic / Varilux Physio / Varilux Physio Short / Varilux Physio DRx / Varilux Physio DRx Short / Varilux Stylistic Wrap / Supercede II / Autograph II Attitude Wrap / Autograph II Office / Shamir Computer / Shamir Golf Progressive / Shamir InTouch / Shamir Work Space / Shamir Spectrum + / Shamir Autograph Attitude Fashion / Shamir Autograph Attitude Fashion Short / Shamir Autograph Attitude Sport / AO Easy HD / Compact Ultra HD / GT2 3D / GT2 3D Short / Sola One HD / Zeiss Choice Plus / Zeiss Offilens / Concise Digital / DST Custom Plus HD / DST Custom Plus HD Sun Wrap / Precise Digital / Precise Digital Short / Unique / Kodak Unique DRO / IOT Ultimate / IOT Universal / IsSential / TruClear SD / Nikon Digi Life / Synchrony Performance HD / Synchrony Easy Wear HD / Synchrony Ultra HD / Synchrony Work & Go HD / Synchrony Work & Read HD / Synchrony Work & Office HD / Synchrony PAL Starter HD / Hoya Array Fixed / Hoya Array VL / Hoya Summit ECP IQ / Hoya Summit CD IQ / Hoya ID Zoom / Hoya ID Screen / Hoya ID Space / Zeiss Energize Me</p>
TIER 4 - Other Premium Progressives
Anti-Reflective Classification*
Standard Anti-Reflective Coatings as Follows:
<p>Sharp View Plus / Crizal Kids w/UV / Hoya Premium Coating / Zeiss Super ET / Backside AR / Custom CleAR / Custom CleAR Sun / Clean Shield AR / ProClean / Reflection Free / RF Endura / Trion AR / HMC Plus / Blue Shield AR / SYNGERY Crystal AR / SYNGERY Crystal UV AR / RayBan Sun AR / Synchrony HMC / Standard AR / Standard Backside AR / Anti-Reflective AR / CleAR</p>
Premium Anti-Reflective Coatings as Follows:
<p>TIER 1 - Crizal Easy w/UV / Crizal Prevencia Kids / Xperio Sun UV / Xperio Sun UV w/Mirrors / VISO / HiVision / Hoya Premium w/ViewProtect / BluCrystal / Kodak CleAR / RF Endura EZ / Zeiss DuraVision Chrome</p>
<p>TIER 2 - Crizal Alize w/UV / Crizal SunShield w/UV / VISO XC / HiVision w/ViewProtect / Allure AR / Zeiss DuraVision Silver / Custom CleAR Plus / Custom CleAR Plus Sun / Clean Shield Elite AR / Clean Shield Elite Sun AR / ECC AR / Kodak Clean'N CleAR / Kodak Clean N Clear AR UV / Kodak Total Blue AR / Vivid AR / RayBan Premium AR / Synchrony HMC+ / Premium AR / EasyCare Premium AR / EZ Premium CleAR</p>
TIER 3 - Other Premium Anti-Reflective Coatings

EyeMed Vision Care reserves the right to make changes to the products on each tier and the member out-of-pocket amounts

* Fixed pricing is reflective of brands at the listed product level. All providers are not required to carry all brands at all levels

January 1, 2019

