Cardinal Healthcare Management – VSP Choice Network Plan Summary Buy-up Vision

Metropolitan Life Insurance Company

With your Vision Preferred Provider Organization Plan, you can:

- Go to any licensed vision provider and receive coverage. Just remember your benefit dollars go further when you stay in network.

- Choose from a large network of ophthalmologists, optometrists, and opticians, from private practices to retailers like Costco® Optical, Walmart, Sam's Club and Visionworks.

In-network value added features:

Additional lens enhancements: Inaddition to standard lens enhancements, enjoy an average 20-25% savings on all other lens enhancements.[1]

Savings on glasses and sunglasses: Get up to 20% savings on additional pairs of prescription glasses and non-prescription sunglasses, including lens enhancements. At times, other promotional offers may also be available.[1]

Laser vision correction: [2] Potential savings averaging 15% off the regular price or 5% off a promotionaloffer for laser surgery including PRK, LASIK and Custom LASIK. This offeris only available at MetLife participating locations.

In-network benefits

There are no claims for you to file when you go to a participating vision provider. Simply pay your copay and, if applicable, any amount over your allowance at the time of service.

Frequency

Eye exam   Once per Calendar Year

- Eye health exam, dilation, prescription, and refraction for glasses: At no additional cost.
- Retinal imaging: Up to a **$39** copay on routine retinal screening when performed by a private practice.

Frame   Once per Calendar Year

- Allowance: **$160** after **$10** eyewear copay.

- Costco®, Walmart® and Sam's Club®: **$90** allowance after **$10** eyewear copay. You will receive an additional **20%** savings on the amount that you pay over your allowance. This offer is available from all participating locations except Costco®, Walmart® and Sam's Club®.

Standard corrective lenses   Once per Calendar Year

- Single vision, lined bifocal, lined trifocal, lenticular: At no additional cost after **$10** eyewear copay.

Standard lens enhancements[1]   Once per Calendar Year

- Standard Polycarbonate (child up to age 18)**,** and Ultraviolet (UV) coating, Solid or Gradient Tints and Polycarbonate (adult): At no additional cost after **$10** eyewear copay.

- Progressive Standard, Progressive Premium/Custom, Scratch-resistant coatings, Anti-reflective, Photochromic: Your cost will be limited to a copay that MetLife has negotiated for you. These copays can be viewed after enrollment at metlife.com/mybenefits.

Contact lenses (instead of eyeglasses)   Once per Calendar Year

- Contact fitting and evaluation: Covered in full
- Elective lenses: **$160** allowance
- Necessary lenses: At no additional cost after eyewear copay.

We're here to help

Find a Vision provider at
www.metlife.com/vision

Download a claim form at
www.metlife.com/mybenefits

For general questions go to
www.metlife.com/mybenefits
or call 1-855-MET-EYE1
(1-855-638-3931)

Out-of-network reimbursement*

You pay for services and then submit a claim for reimbursement. The same benefit frequencies for **In-network benefits** apply. Once you enroll, visit www.metlife.com/mybenefits for detailed out-of-network benefits information.

• Eye exam: up to **$45**	• Single vision lenses: up to **$30**	• Progressive lenses: up to **$50**
• Frames: up to **$70**	• Lined bifocal lenses: up to **$50**	
• Contact lenses:	• Lined trifocal lenses: up to **$65**	
• Elective up to **$105**	• Lenticular lenses: up to **$100**	
• Necessary up to **$210**		

*If you choose an out-of-network provider, you may have increased out-of-pocket expenses, must pay in full at time of service, and must file a claim for reimbursement.

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1   All lens enhancements are available at participating private practices. Maximum copays and pricing are subject to change without notice. Please check with your provider for details and copays applicable to your lens choice. Please contact your local Costco, Walmart or Sam's Club to confirm availability of lens enhancements and pricing prior to receiving services. Additional discounts may not be available in certain states.

2   Custom LASIK coverage only available using wavefront technology with the microkeratome surgical device. Other LASIK procedures may be performed at an additional cost to the member. Additional savings on laser vision care is only available at participating locations.