

## HIGHLIGHTS

Here is a summary of some features of the Vision Care Plan.

Plan Feature	Summary
Eligibility	If you are an <b>eligible employee</b> (a regular, active, full-time or part-time, salaried employee who works for a <b>Participating Company</b> ), you are eligible for coverage. You may also enroll your <b>eligible dependents</b> .
When Coverage Begins	Coverage for you and your <b>eligible dependents</b> begins on your first day of work with a <b>Participating Company</b> , if you elect to enroll for coverage within your initial enrollment period.
Coverage Provided	The Vision Care Plan covers routine eye exams and prescription lenses (including one necessary eyeglass frame) or prescription contact lenses.
When Benefits Are Paid	The Vision Care Plan pays benefits for each eligible service or supply once in a calendar year. This applies individually to each person covered under the Vision Care Plan.
Benefits Paid Based on Your Choice of Provider	Benefits are paid based on whether you received services from a network provider available through the Vision Care Plan, or from an out-of-network provider.  While you are free to go to the provider of your choice, your out-of-pocket expenses are generally lower when you go to a network provider.
Cost	You pay 100% of the cost of coverage which varies by level of coverage. Your contributions are deducted on a pre-tax basis.