

Vision Plan Benefits for Neenah Joint School District

Deductibles	
Exam/ Materials*	\$0
*\$0 deductible applies to the first service per person per year	

Monthly Premiums	
Emp. only	\$8.89
Emp. + family	\$22.26

Services/Frequency	
Exam	12 months
Frame	24 months
Lenses	12 months
Contact Lenses	12 months

(Based on date of service)

Benefits through [Superior Select Midwest](#)

	In-Network	Out-of-Network
Exam	Covered in full	Up to \$35 retail
Frames	\$125 retail allowance	Up to \$70 retail
Lenses (standard) per pair		
Single Vision	Covered in full	Up to \$25 retail
Bifocal	Covered in full	Up to \$40 retail
Trifocal	Covered in full	Up to \$45 retail
Progressive	See description ¹	Up to \$45 retail
Contact Lenses ²	\$150 retail allowance	Up to \$125 retail
Medically Necessary Contact Lenses	Covered in full	Up to \$150 retail
Lasik Vision Correction		\$200 allowance ³

Deductibles apply to in-network benefits only

¹ Covered to provider's in-office standard retail lined trifocal amount; member pays difference between progressive and standard retail lined trifocal, plus applicable deductible

² Contact lenses and related professional services (fitting, evaluation and follow-up) are covered in lieu of eyeglass lenses and frames benefit

³ Lasik Vision Correction is in lieu of eyewear benefit, subject to routine regulatory filings and certain exclusions and limitations

Discount Features

Non-Covered Eyewear Discount: Members may also receive a discount of 20% from a participating provider's usual and customary fees for eyewear purchases which exceed the benefit coverage (except disposable contact lenses, for which no discount applies). This includes eyeglass frames which exceed the selected benefit coverage, specialty lenses (i.e. progressives) and lens "extras" such as tints and coatings. Eyewear purchased from a Walmart Vision Center does not qualify for this additional discount because of Walmart's "Always Low Prices" policy.

SuperiorVision.com
Customer Service
800.507.3800

The Plan discount features are not insurance.

All allowances are retail; the member is responsible for paying the provider directly for all non-covered items and/or any amount over the allowances, minus available discounts. These are not covered by the plan.

Discounts are subject to change without notice.

Disclaimer: All final determinations of benefits, administrative duties, and definitions are governed by the Certificate of Insurance for your vision plan. Please check with your Human Resources department if you have any questions.

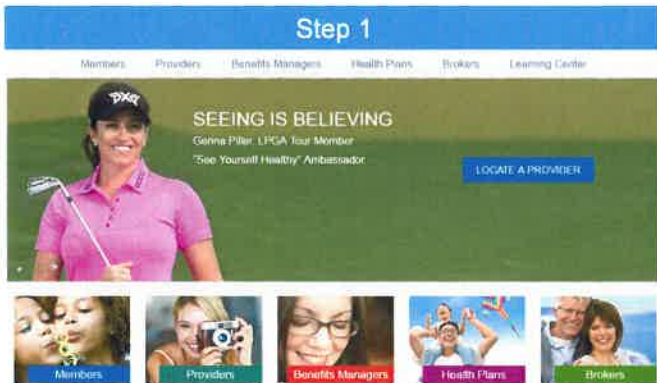
GETTING STARTED GUIDE

Members

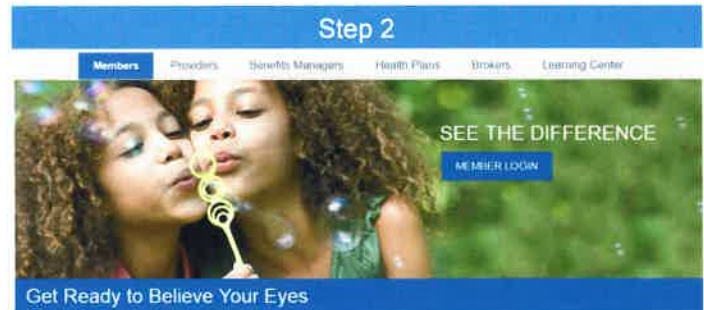


SuperiorVision.com gives you quick access to your vision benefits information. Member account information is shared by all covered family dependents—family members may login as the primary member.

Logging In



From the home page of our website, select “Members” from the navigation.



From the Members page, click the “Member Login” button.



If you have already set up your account, enter your user name and password, if not, click “Create a new account.”

Seeing is Believing

Login to the secure Member area to:

- Locate a provider
- View your benefits and eligibility
- Print your ID card
- Download forms



From the Create Your New Account page, the primary account member can set up an account with their own username and password and have immediate access to the secure Member area of the website.

Customer Service

contactus@superiorvision.com
800.507.3800

Monday—Friday 5:00 am to 6:00 pm PT
Saturday 8:00 am to 1:30 pm PT