



Surency Vision

see the difference



Surency Vision is administered by Surency Life and Health Insurance Company
in cooperation with EyeMed Vision Care.

SURENCY VISION & EYEMED VISION CARE *experienced leaders*

Surency Life and Health and EyeMed Vision Care have aligned to provide you with the best vision product possible, offering access and the choice of providers that today's consumers demand. Our vision product combines the expertise of EyeMed with Surency's strong customer focus - the kind of focus you and your groups deserve.

Features of your plan may include:

- Comprehensive Eye Exam
- Overall material savings of up to 40% off
- Choice of any product eyewear - Members will not need to choose frames from "towers" or "boxes"
- Convenient access to vision care needs 7 days a week
- Savings on eyecare and eyewear all year long

Additional Value Added Savings

Surency Vision plans also feature additional discounts once the initial benefit has been used including:

- 40% discount off additional pairs of eyeglasses at an unlimited frequency
- 40% discount off prescription sunglasses
- 20% discount off amount over frame allowable
- 15% discount off the amount over conventional contact lenses allowable
- 20% discount off non-covered items such as cleaning cloths and solutions
- 15% off retail or 5% off promotional price of laser vision correction

Convenient Provider Network

Surency Vision is proud to collaborate with EyeMed Vision Care to provide a network for our members that offers quality, convenience and choice. EyeMed has one of the largest, most diverse networks in the nation, which includes both nationally recognized retail chains and independent private practitioners.

- Access to 580+ providers at more than 200 locations in Kansas
- Access to 45,000+ providers at more than 21,500 locations nationwide
- Find convenient provider locations online at www.surency.com
- Popular retail chains including:



LENSCRAFTERS®



PEARLE VISION®

For more information on the **Surency Vision** network, please contact Surency customer service at **866.818.8805** or visit the Locate a Provider section of www.surency.com.

SURENCY VISION

plan design and rates

Monthly Rates:

Employee: \$8.23

Family: \$25.90

Effective June 1, 2010

SERVICES	IN NETWORK MEMBER COST	OUT OF NETWORK ALLOWANCES	FREQUENCY
Vision Examination with Dilation as Necessary	\$10	\$35	Once every 12 months
Contact Lens Fit and Follow-Up: <i>(Contact lens fit and two (2) follow-up visits are available once a comprehensive eye exam has been completed.)</i>			
Standard -spherical clear contact lenses in conventional wear and planned replacement (Examples include but not limited to disposable, frequent replacement, etc.)	\$0	\$40	Once every 12 months
Premium -all lens designs, materials and specialty fittings other than Standard Contact Lenses (Examples include toric, multifocal, etc.)	\$0 Copay 10% off Retail	\$40	Once every 12 months
Frames: Any available frame at provider location.	\$100 Allowance	\$50	Once every 24 months
Standard Plastic Lenses: Single Vision Bifocal Trifocal	\$25 Copay \$25 Copay \$25 Copay	\$25 \$40 \$55	Once every 12 months
Lens Options: Standard Polycarbonate	Adults: \$40, Dependents: under 19: \$0	\$25	Once every 12 months
UV Coating	\$15	Not Covered	Once every 12 months
Tint (Solid and Gradient)	\$15		
Standard Scratch-Resistance	\$15		
Standard Anti-Reflective Coating	\$45		
Standard Progressive (Add-on to Bifocal)	\$65		
Premium Progressive Other Add-Ons and Services	20% off Retail Price 20% off Retail Price		
Contact Lenses: <i>(Contact lens allowance includes materials only) (Allowance not available if eyeglass lenses are elected)</i>			
Conventional	\$115 allowance, 15% off balance over \$115	\$90	Once every 12 months
Disposable	\$115 allowance	\$90	
Medically Necessary	\$0	\$200	

Service frequencies are computed by date of service, not calendar year.

This is a Summary of benefits only, and various exceptions and limitations may apply. Your actual coverage is described in the Agreement which is binding on all of the parties and supersedes all other written or oral communications.

SURENCY VISION

underwriting guidelines

1. For a group to qualify for coverage there must be an employer/employee relationship, the coverage must be offered on an employee-sponsored basis and only for the eligible employees of the group.
2. This plan is available only to those businesses who are members in good standing of the Wichita Independent Business Association and/or the Kansas Organization for Private Enterprise and the coverage is provided by these member business for their respective employees under the following requirements:
 - a. For businesses having from two (2) to five (5) employees, all eligible employees must be enrolled for coverage and the member business must pay one hundred percent (100%) of the premium for the employees.
 - b. For businesses having from six (6) to nine (9) employees, the greater of six (6) or seventy-five percent (75%) of the eligible employees must be enrolled for coverage and the employer must pay as least seventy-five percent (75%) of the premium for the employees.
 - c. If the family coverage is elected in either option, at least seventy-five percent (75%) of those employees eligible and having eligible dependents must insure their dependents.
3. Groups must be domiciled in Kansas and eighty percent (80%) of the covered group must be employed in Kansas.
4. Each employee who becomes an eligible employee after the initial contract period will be eligible for benefits the first day of the calendar month following the completion of sixty (60) days of employment.
5. Voluntary (employee-pay-all) plans can not coexist with another vision plan.
6. To enroll dependents, the employee must be enrolled.
7. If coverage is dropped at any time, employee and/or dependents may not reenroll until the first open enrollment following one year from the date coverage is discontinued.
8. A two-tier rate structure is offered; however, the entire group chooses only one pricing structure and only one plan design.
9. If an employee does not enroll at their first opportunity, they must wait until the group's next renewal date.
10. All rates will be guaranteed for 12 months.
11. These rates are quoted for an effective date of June 1, 2010.

For more information about the **Surency Vision** plan available to WIBA members, contact the Wichita Independent Business Association at (316) 267-8987. This vision plan is endorsed by the Wichita Independent Business Association and is administered by:

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