

Group Vision Insurance

Help protect your eye health with coverage for exams, glasses and contacts.

This summary of benefits and coverage shows how you and The Standard would share the cost for covered vision care services.

NOTE: This is only a summary; for detailed information on coverage, please consult your certificate of coverage.

Plan 1: Balanced Care Vision II Plan H Summary

| | EyeMed Access Network | Out of Network |
|-----------------------|---------------------------------------|--------------------------|
| Deductibles | | |
| | \$0 Exam | No deductible |
| | \$0 Eye Glass Lenses | |
| Annual Eye Exam | Covered in full | Up to \$40 |
| Lenses (per pair) | | |
| Single Vision | Covered in full | Up to \$40 |
| Bifocal | Covered in full | Up to \$60 |
| Trifocal | Covered in full | Up to \$80 |
| Lenticular | 20% discount | Up to \$80 |
| Progressive | See lens options | Up to \$80 |
| Contacts | | |
| Fit & Follow Up Exams | | |
| Standard | Standard: Participant cost up to \$55 | Not covered |
| Premium (Allowance) | Premium: 10% off of retail | Not covered |
| Elective | Up to \$150 | Up to \$150 |
| Medically Necessary | Covered in full | Up to \$210 |
| Frame Allowance | \$150 | Up to \$45 |
| Frequencies (months) | | |
| Exam/Lens/Frame | 12/12/24 | 12/12/24 |
| | Based on date of service | Based on date of service |

Lens Options (participant cost)

| | EyeMed Access Network | Out of Network |
|---------------------------|---|----------------|
| Progressive Lenses | | Not covered |
| Standard | Standard: \$0 + lens deductible | |
| Premium | Premium: lens cost - 20% discount - \$120 allowance + Standard Progressive cost | |
| Std. Polycarbonate | \$40 | Not covered |
| Tint (solid and gradient) | \$15 | Not covered |
| Scratch Resistant Coating | Covered in Full | Not covered |
| Anti-Reflective Coating | \$45 | Not covered |
| Ultraviolet Coating | \$15 | Not covered |
| Lasik or PRK | Average discount of 15% off retail price or 5% off promotional price at US Laser Network participating providers. | Not covered |

| Additional Balanced Care Vision II H Features | |
|---|---|
| EyeMed In-Network Discounts | 15% discount off the remaining balance in excess of the conventional contact lens allowance. 20% discount off the remaining balance in excess of the frame allowance. 20% discount on items not covered by the plan at network providers, which may not be combined with any other discounts or promotional offers. This discount does not apply to EyeMed Provider's professional services, or contact lenses. |
| EyeMed In-Network Secondary Purchase Plan | Participants receive a 40% discount on a complete pair of glasses once the funded benefit has been exhausted. Participants receive a 15% discount off the retail price on conventional contact lenses once the funded benefit has been exhausted. Discount applies to materials only. |
| Contact Lens Replacement by Mail Program | After exhausting the contact lens benefit, replacement lenses may be obtained at significant discounts on-line. Visit www.eyemedvisioncare.com for details. |

Based on applicable laws, reduced costs may vary by doctor location.

Section 125

This plan is provided as part of the Policyholder's Section 125 Plan. Each employee has the option under the Section 125 Plan of participating or not participating in this plan. If an employee does not elect to participate when initially eligible, he/she may elect to participate at the Policyholder's next Annual Election Period.

Vision Plan Participant Service

Balanced Care Vision II from The Standard features the money-saving eye care network of EyeMed Vision Care. Customer service is available to plan participants through EyeMed's well-trained and helpful service representatives. Call or go online to locate the nearest EyeMed Access network provider, view plan benefit information and more.

EyeMed Customer Care Center: 866.289.0614

- Service representative hours: 8 a.m. to 11 p.m. ET Monday through Saturday, 11 a.m. to 8 p.m. ET Sunday
- Interactive Voice Response available 24/7

Locate an EyeMed provider at:

www.standard.com/services

About The Standard

For more than 100 years, we have been dedicated to our core purpose: to help people achieve financial well-being and peace of mind. Headquartered in Portland, Oregon, The Standard is a nationally recognized provider of group employee benefits. To learn more about products from The Standard, visit us at www.standard.com.

The Standard is a marketing name for StanCorp Financial Group, Inc. and subsidiaries. Insurance products are offered by Standard Insurance Company of Portland, Oregon, in all states except New York. Product features and availability vary by state and are solely the responsibility of Standard Insurance Company.

This form is a benefit highlight, not a certificate of insurance. This policy has exclusions, limitations, reductions of benefits, and terms under which the policy may be continued in force or terminated. Please contact The Standard or your employer for additional information, including costs and complete details of coverage.