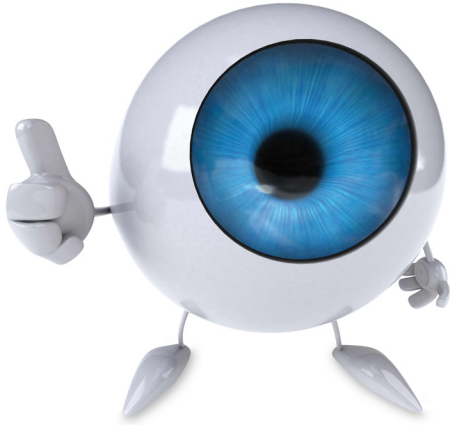


# GEBA's Vision Coverage



## THE EYES HAVE IT!

Now open to all Federal Employees and Retirees,  
Active and Retired Military, and their families!

Online Enrollment only available at: [www.GEBA.com/vision](http://www.GEBA.com/vision)

**Two Plan Options:** Standard and Enhanced Vision Plans

### Why GEBA?

- NEW! Higher benefits for frames and contact lenses
- Affordable rates
- Dependent children coverage up to age 26
- New frames and lenses every 12 months
- Enhanced Plan - full coverage for standard transition and progressive lenses
- Over 51,000 in-network providers
- GEBA's exceptional customer service
- Plus, NVA offers a hearing aid discount with EPIC Hearing Service Plan



## What is Vision Insurance? Why Should I Enroll?

GEBA's Vision Insurance makes caring for your eyes more affordable. It covers eye exams, eyeglass lenses and frames, contact lenses, and provides discounts on laser vision correction through a nationwide network of professionals. When you enroll in GEBA's Vision Insurance Plan, you'll get great features at a great price; in most cases, better than any other federal government or private plan. Here are some of the great plan benefits:

- Two plan options to choose from for your specific vision needs: Standard and Enhanced
- Dependent children coverage up to age 26
- A strong network with 51,000 eyecare providers, including local optometrists, opticians, and retailers
- Contact lenses conveniently purchasable over the internet
- \$150 towards new frames or contact lenses every 12 months
- Easy-to-use insurance card – No claim forms!

Enrolling in GEBA's Vision Plan gives you great vision benefits along with GEBA's top-notch customer service and more than 60 years of experience in benefits and insurance.

## What are the Benefits and Features?

- Vision Exam . . . . . Covered every 12 months
- New Lenses (many options available) . . . . . Covered every 12 months
- New Eyeglass Frames . . . . . Covered every 12 months
- Contacts in Lieu of Glasses . . . . . Covered every 12 months
- Contact Lens Evaluation/Fitting . . . . . Covered every 12 months
- Low Vision Aids (e.g., Magnifying Glasses) . . . . . Covered up to \$999 every 24 months
- Benefits Payable Using Either a Participating or Non-Participating Provider
- NEW! Hearing Aid Discount through EPIC Hearing. Learn more at [www.GEBA.com/vision](http://www.GEBA.com/vision)

## Who is Eligible?

Federal employees and retirees, active and retired military, contractors assigned to NSA-W, and sponsored family members are eligible to enroll in GEBA's Vision Plan.

Plan participants may elect coverage for a spouse (unless legally separated), domestic partner, and [dependent children up to age 26](#).

## Sponsored Family Members (Extended Family)

Your extended adult family members are eligible for GEBA's Vision Plan if you are enrolled in any GEBA plan. Extended family members include adult siblings, children and grandchildren, parents, in-laws, and grandparents. Share the news with your extended family - they will benefit from the savings of our group plans. For more information on our Sponsored Family Member Program, visit [www.GEBA.com/family](http://www.GEBA.com/family).

## Easy Enrollment Options!

1. You can only apply online at [www.GEBA.com/vision](http://www.GEBA.com/vision) through our secure application. Your information is protected, it takes just minutes, and we receive your application immediately.
2. If you prefer, you can complete and sign GEBA's Vision Insurance Enrollment Form enclosed. You can email, fax, or mail the completed form to GEBA.

Your coverage will be effective on the first day of the month after GEBA receives your application. ***Because benefits are payable annually, participants must commit to one full year of premium payments upon enrollment. Upgrades, downgrades, and cancellations will not be available during the first 12 months of coverage.***

## Flexible Payment Options

1. Payroll - premiums can be paid biweekly (NSA and DIA employees only).
2. Automatic Debit - from your checking or savings account (monthly, quarterly, semiannually, or annually).

## Plan Overview

For a full overview of our Vision Plan and what it offers, visit [www.GEBA.com/vision](http://www.GEBA.com/vision)

Benefit Frequency	Standard Plan		Enhanced Plan	
	Participating Provider	Non-Participating Provider	Participating Provider	Non-Participating Provider
<b>Examination:</b> Once Every 12 Months	Covered 100%	Reimbursement Amt: Up to \$40	Covered 100% After \$10 Copay	Reimbursement Amt: Up to \$40
<b>Lenses:</b> Once Every 12 Months	Standard Glass or Plastic		Standard Glass or Plastic	
Single Vision	Covered 100% (Polycarbonates: covered 100% for children up to their 19th birthday)	Up to \$30	Covered 100%	Up to \$30
Bifocal		Up to \$40		Up to \$40
Trifocal		Up to \$75		Up to \$75
Lenticular		Up to \$75		Up to \$75
Solid Tints		N/A		N/A
Fashion Gradient Tints		N/A		N/A
Blended Bifocal (Segment)		N/A		N/A
Polycarbonates		N/A		N/A
Standard Lenses		N/A		N/A
Standard Progressive Lenses <sup>1</sup>		\$50 (fixed price)		N/A
Premium Progressive Lenses <sup>2</sup>	\$100 (fixed price)	N/A	\$100 (fixed price)	N/A
Photochromatic	N/A	N/A	N/A	N/A
Photogrey	\$20-30 (fixed price)	N/A	Covered 100%	N/A
Standard Transitions	\$65 (fixed price)	N/A		N/A
Standard Scratch Coating	\$10 (fixed price)	N/A		N/A
<b>Frame:</b> Once Every 12 Months	Retail Allowance Up to \$150 (20% discount off balance) <sup>3</sup>	Up to \$50	Retail Allowance Up to \$150 (20% discount off balance) <sup>3</sup>	Up to \$30
<b>Contact Lenses:</b> Once Every 12 Months	In Lieu of Glasses		In Lieu of Lenses	
Elective Contact Lenses	Up to \$150 Retail 15% (Conventional) or 10% (Disposable) off balance <sup>4</sup>	Up to \$130	Up to \$150 Retail Discount: 15% (Conventional) or 10% (Disposable) off balance <sup>4</sup>	Up to \$130
Contact Lens Evaluation/Fitting <sup>5</sup>	Covered 100% after \$20 Daily Wear \$30 Extended Wear \$50 Specialty Wear copay	Daily Wear: \$20 Extended Wear: \$30 Specialty Wear: \$50	Covered 100% after \$20 Daily Wear \$30 Extended Wear \$50 Specialty Wear copay	Daily Wear: \$20 Extended Wear: \$30 Specialty Wear: \$50
Medically Necessary <sup>6</sup>	Covered 100%	Up to \$260	Covered 100%	Up to \$260
<b>Low Vision Aids<sup>6</sup>:</b> Once every 24 Months	Up to \$999	N/A	Up to \$999	N/A

<sup>1</sup> **Standard Progressive Lenses** — Multifocal lenses with no lines. There is not a harsh jump in focus that bifocal and trifocal wearers experience because the change is gradual. For a complete list of Standard Progressive Lenses visit [www.GEBA.com/vision](http://www.GEBA.com/vision).

<sup>2</sup> **Premium Progressive Lenses** — Multifocal lenses with no lines, but made with state-of-the-art technology. Please visit [www.GEBA.com/vision](http://www.GEBA.com/vision) for a complete list of Premium Progressive Lenses that are covered.

<sup>3</sup> Discount does not apply at Walmart or Sam's Club locations or certain proprietary brands or where prohibited by law. Discounts are not insured benefits.

<sup>4</sup> Discount does not apply at Walmart or Sam's Club locations or Contact Fill.

<sup>5</sup> Fittings vary at Walmart/Sam's Club locations and are only covered if you choose Contact Lenses.

<sup>6</sup> Prior authorization required from NVA.

**Due to their everyday low prices (EDLP) the amounts listed below may not be applicable at Walmart/Sam's Club.**

Lens options purchased from a participating NVA provider will be provided to the member at the amounts listed in the fixed option pricing list below:

### Standard Plan

\$100 Premium Progressive Lenses <sup>1</sup>	\$50 Progressive Lenses Standard <sup>1</sup>
\$75 Polarized	\$65 Transitions Single Vision Standard
\$10 Standard Scratch-Resistant Coating	\$70 Transitions Multi-Focal Standard
\$55 High Index	\$25 Polycarbonate (Single Vision) 19 & over
\$20 Glass Photogrey (Single Vision)	\$30 Polycarbonate (Multi-Focal) 19 & over
\$30 Glass Photogrey (Multi-Focal)	\$40 Standard Anti-Reflective

### Enhanced Plan

\$75 Polarized	\$100 Premium Progressive Lenses <sup>1</sup>
\$55 High Index	\$12 Ultraviolet Coating
\$40 Standard Anti-Reflective	

<sup>1</sup>Fixed pricing not available on certain brands.

## Underlying Insurance Provider

GEBA's Vision Insurance is provided by National Vision Administrators® (NVA). Since 1979, NVA has built a quality reputation for Vision Insurance featuring great customer support and a strong network of providers that give unparalleled service to their customers.

## Frequently Asked Questions

### What happens if I retire or resign?

Once a GEBA member, always a GEBA member as long as you own a plan. That means you can keep your GEBA Vision Insurance as long as you desire regardless of retirement or resignation. If you decide to keep your coverage, please complete the retirement/resignation form. (You may need to elect another form of payment.) This form can be found at [www.GEBA.com/forms](http://www.GEBA.com/forms).

### How do I access my benefits information, find a provider, or replace my ID cards?

Visit [www.e-nva.com](http://www.e-nva.com) to access your personal benefits information, track claims, replace ID cards, and find a participating provider.

#### Locate a Provider

- Click “Find Provider”,
- Select “GEBA” as group/sponsor,
- Enter the zip code and the radius in which you would like to travel.

#### Print ID Cards:

- Click “Subscriber Registration”.
- Enter Subscriber ID which is your GEBA member ID with three zeros in front (ex. 000123456). If you do not know your GEBA member ID, you can contact the GEBA office at (301) 688-7912 or (800) 826-1126 and we will provide the ID,
- Once logged in, the option to “Print ID Cards” will appear on the left side of the screen as the second option. Keep in mind that your insurance cards will be mailed to you within 5 to 7 business days after your coverage effective date.

### What are the limitations on the plan?

No payment is made for: Medical or surgical treatments | Rx drugs or OTC medications | non-prescription lenses | two pairs of glasses in lieu of bifocals | vision examination or materials required for employment | replacement of lost, stolen, broken, or damaged lenses | contact lenses or frames except at normal intervals when service would otherwise be available | services or materials provided by federal, state, local government or worker’s compensation | examination, procedures training, or materials not listed as a covered service | industrial safety lenses and safety frames with or without side shields | parts or repair of frame | sunglasses.

Participating providers are not contractually obligated to offer sale prices in addition to outlined coverage. Regardless of medical or optical necessity, vision benefits are not available more frequently than specified in your policy.

Government Employees’ Benefit Association, Inc.

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