

 DELTA DENTAL®

 DELTAVISION®

DeltaVision® Product Brochure *Insured Vision Plans*

Safety Eyewear
plan now available
(see inside for details)



Welcome to DeltaVision®



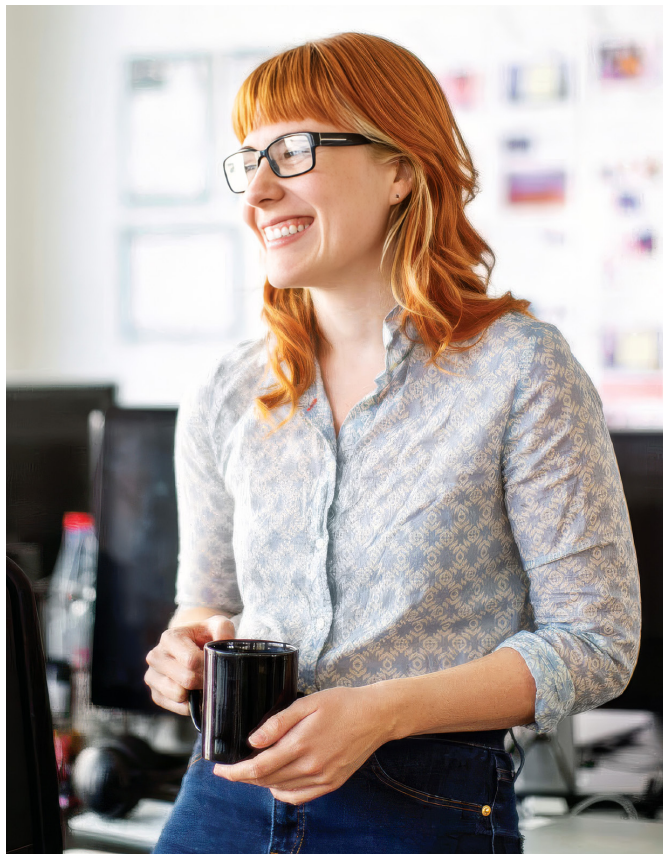
Help your employees see clearly. Add a DeltaVision plan today. A DeltaVision plan will help your employees get the vision care they need.

- DeltaVision is supported by the nationwide EyeMed Vision Care Access Network, including private practitioners and popular retail and online retail locations.
- Members are free to see any optical provider they choose, either in-network or out-of-network. They will receive the most value from their DeltaVision benefits when they receive care from in-network providers.
- Members receive a **40% discount** off all additional complete prescription eyeglass purchases and a **15% discount** off all additional conventional contact lens purchases after their funded benefit has been used. The frequency is unlimited and available at all in-network provider locations.
- Members receive ID cards and have access to **live customer service 102 hours per week** (the most in the industry), including nights and weekends.
- Schedule an eye exam online through the provider: <https://member.eyemedvisioncare.com/nedd>

To Enroll a Group

Provide the following to Northeast Delta Dental prior to the first of the month in which the coverage is to be effective:

- The employer completes a contract application, preferably online.
- Employee elections can be made electronically or via enrollment form.
- Include the first month's premium or ACH (auto-withdrawal) form with application.



Our Guarantee

The Service: Smooth Implementation of a DeltaVision Plan.

The Guarantee: Successful implementation will be determined through feedback provided by the group.

The Refund: The group will be reimbursed the administration fee charged for its second month of service (not to exceed \$500) if the service guarantee is not met.

DeltaVision is underwritten by Red Tree Insurance Company, Inc., a Northeast Delta Dental company. Claims processing, claims service, and provider network administration for DeltaVision are provided under contract, by EyeMed Vision Care, LLC and its affiliate, First American Administrators, Inc.

Two-person groups may not consist of spouses or unmarried individuals residing at the same address.



Underwriting Guidelines

- Offered to employers with at least two full-time employees and a minimum of two employees enrolled in the plan.
- Two-person groups may not consist of spouses or unmarried individuals residing at the same address.
- A clear employer/employee relationship must exist.
- Only group-billing format is available; no individual billings can be accommodated.
- In order to enroll dependents, the employee must be enrolled.
- Other underwriting guidelines may apply.

Rate Guarantees

Rates are guaranteed for 48 months when the vision plan takes effect on a current Northeast Delta Dental plan anniversary or if the vision plan is a standalone benefit. Rates for a vision plan effective off a dental plan anniversary are guaranteed for 36 months plus the number of months to get to a common anniversary.

Example: Dental plan is effective 1/1/26. New vision plan starts 6/1/26. Rate guaranteed for 43 months or until 12/31/29.

The Fine Print

The following items are not offered under all DeltaVision plans:

- Orthoptic or vision training, subnormal vision aids, and associated supplemental testing.
- Medical and/or surgical treatment of the eye, eyes, or supporting structures.
- Corrective eyewear required by an employer as a condition of employment (e.g. safety eyewear, which is only covered under a safety eyewear plan)
- Services provided as a result of any worker's compensation law.
- Plano nonprescription lenses and nonprescription sunglasses (except for 20% discount).
- Aniseikonic lenses.
- A discount is not available on certain limited frame brands in which the manufacturer imposes a no-discount policy. The frame allowance does apply.
- Two pairs of glasses in lieu of bifocals.
- Allowances are one-time-use benefits; no remaining balance (If your plan has a \$130 frame allowance and you purchase a frame for \$120, you do not have a \$10 balance to be used at a later date).
- Lost or broken materials are not covered.
- Other limitations and exclusions may apply.



ACCESS VISION NETWORK

The choice is always yours

All DeltaVision plans use the EyeMed Access network, giving you lots of choices. Be it an independent eye doctor, popular retailer or online option, with the Access network you get the latest in advanced vision technology to see even the slightest vision issue. And with more providers across more locations, you're free to see the one who fits your needs the best.

INDEPENDENT PROVIDERS

The Access network makes it easy to find a trusted neighborhood eye doctor.

RETAIL PROVIDERS

With options including LensCrafters®, Pearle Vision®, Target Optical® and many other favorite regional retailers, you can pick the location and hours that work for you.

SHOP ONLINE

Staying in-network can also mean using your vision benefits online at:

- Lenscrafters.com
- Glasses.com
- Targetoptical.com
- Contactsdirect.com
- Ray-ban.com
- Oakley.com

NEW: WALMART AND SAM'S CLUB LOCATIONS

Walmart Supercenter and Sam's Club locations offer additional choices for your vision needs. Walmart Supercenters and Sam's Club locations complement the EyeMed Access network, offering additional choices for your vision essentials. In-network benefits for materials, such as frames, lenses and contact lenses, are available at all Walmart and Sam's Club locations locally and nationwide.

Some Walmart and Sam's Club locations do not have a contracted Optometrist (O.D.) on site, so services such as exams may not apply to your in-network benefits. There may be other Access provider options that maximize your plan benefits. We recommend asking ahead of your appointment to confirm if there is an in-network O.D. on site and the location is full-service.

Visit <https://member.eyemedvisioncare.com/nedd> to search for an in-network provider near you.



DeltaVision plan summary

Full coverage plan



	Network benefit
Exam – comprehensive, with dilation as necessary (Comprehensive spectacle exam)	Member pays copay; plan pays balance
Contact lens fit and follow-up: Standard lenses	Member pays up to \$55
Contact lens fit and follow-up: Premium lenses	10% off the retail price
Frames – Any available frame at provider location.	Plan pays frame allowance amount, then 20% off balance

Standard plastic lenses

Single vision	Member pays copay; plan pays balance
Bifocal	Member pays copay; plan pays balance
Trifocal	Member pays copay; plan pays balance

Lens options – In addition to copay for standard plastic lenses

UV Coating / Tint / Standard scratch resistance	Member pays \$15 for each
Standard polycarbonate	Member pays \$40
Standard anti-reflective coating	Member pays \$45
Standard progressive	Member pays \$65
Other add-ons and services	20% off retail price

Contact lenses – In lieu of spectacle lenses (contact lens allowance covers materials only)

Conventional	Plan pays contact lens allowance amount, then 15% off balance
Disposable	Plan pays contact lens allowance, member pays balance
Medically necessary	Paid in full
Laser vision correction – Lasik or PRK For a location near you, and the discount authorization, please call 1-877-5LASER6.	15% off retail price or 5% off promotional price

Non-network reimbursement

Exam	Up to \$35
Single vision lens	Up to \$25
Lined bifocal	Up to \$40
Lined trifocal	Up to \$55
Frame*	Up to \$90
Contacts*	Up to \$144

*Varies depending upon your In-Network Allowance.



*Offered to employers with a minimum of two employees enrolled in the plan.
Two-person groups may not consist of spouses or unmarried individuals residing at the same address.*

FULL COVERAGE PLAN, COVERING FRAMES ONCE EVERY 24 MONTHS

Vision benefits	\$130 Plans			\$150 Plans			\$180 Plans		
Allowances:									
Frames	\$ 130			\$ 150			\$ 180		
Contacts	\$ 130			\$ 150			\$ 180		
Frequency (in months)									
Examination	12			12			12		
Lenses or Contact Lenses	12			12			12		
Frame	24			24			24		
Copayments:									
Exams	\$10	\$10	\$20	\$10	\$10	\$20	\$10	\$10	\$20
Lenses	\$10	\$25	\$20	\$10	\$25	\$20	\$10	\$25	\$20

Please contact your Northeast Delta Dental representative for rate information.



FULL COVERAGE PLAN, COVERING FRAMES ONCE EVERY 12 MONTHS

Vision benefits	\$130 Plans			\$150 Plans			\$180 Plans		
Allowances:									
Frames	\$ 130			\$ 150			\$ 180		
Contacts	\$ 130			\$ 150			\$ 180		
Frequency (in months)									
Examination	12			12			12		
Lenses or Contact Lenses	12			12			12		
Frame	12			12			12		
Copayments:									
Exams	\$10	\$10	\$20	\$10	\$10	\$20	\$10	\$10	\$20
Lenses	\$10	\$25	\$20	\$10	\$25	\$20	\$10	\$25	\$20

Please contact your Northeast Delta Dental representative for rate information.



DeltaVision plan summary

Hardware only plan



Network benefits	
Frames	
Any available frame at provider location.	Plan pays frame allowance amount, then 20% off balance
Standard plastic lenses	
Single vision	Member pays copay; plan pays balance
Bifocal	Member pays copay; plan pays balance
Trifocal	Member pays copay; plan pays balance
Lens options – In addition to copay for standard plastic lenses	
UV coating / Tint / Standard scratch resistance	Member pays \$15 for each
Standard polycarbonate	Member pays \$40
Standard anti-reflective coating	Member pays \$45
Standard progressive	Member pays \$65
Other add-ons and services	20% off retail price
Contact lenses – In lieu of spectacle lenses (contact lens allowance covers materials only)	
Conventional	Plan pays contact lens allowance amount, then 15% off balance
Disposable	Plan pays contact lens allowance, member pays balance
Medically necessary	Paid in full
Laser vision correction – Lasik or PRK For a location near you, and the discount authorization, please call 1-877-5LASER6.	15% off retail price or 5% off promotional price
Non-network reimbursement	
Single vision lens	Up to \$25
Lined bifocal	Up to \$40
Lined trifocal	Up to \$55
Frame*	Up to \$90
Contacts*	Up to \$144
*Varies depending upon your In-Network Allowance.	



*Offered to employers with a minimum of two employees enrolled in the plan.
Two-person groups may not consist of spouses or unmarried individuals residing at the same address.*

HARDWARE ONLY PLAN, COVERING FRAMES ONCE EVERY 24 MONTHS

Vision benefits	\$130 Plans			\$150 Plans			\$180 Plans		
Allowances:									
Frames	\$ 130			\$ 150			\$ 180		
Contacts	\$ 130			\$ 150			\$ 180		
Frequency (in months)									
Lenses or Contact Lenses	12			12			12		
Frame	24			24			24		
Copayments:									
Lenses	\$ 10	\$ 25	\$ 20	\$ 10	\$ 25	\$ 20	\$ 10	\$ 25	\$ 20

Please contact your Northeast Delta Dental representative for rate information.



HARDWARE ONLY PLAN, COVERING FRAMES ONCE EVERY 12 MONTHS

Vision benefits	\$130 Plans			\$150 Plans			\$180 Plans		
Allowances:									
Frames	\$ 130			\$ 150			\$ 180		
Contacts	\$ 130			\$ 150			\$ 180		
Frequency (in months)									
Lenses or Contact Lenses	12			12			12		
Frame	12			12			12		
Copayments:									
Lenses	\$10	\$25	\$20	\$10	\$25	\$20	\$10	\$25	\$20

Please contact your Northeast Delta Dental representative for rate information.





SAFETY EYEWEAR COVERAGE

Workplace eye injuries are responsible for over 27,000 lost work days, costing an estimated \$300 million annually in medical bills, compensation and lost productivity.¹

And that’s where we come in. Our safety insurance benefit is an easy, affordable way for your members to get prescription eye protection that meets or exceeds standards set by the American National Standards Institute (ANSI) to help them stay safe on the job.

SAFETY FRAMES

- Safety frames that meet or exceed ANSI standards available in a wide variety of the latest styles and colors

PRESCRIPTION LENSES

- Fully covered base safety lens, with no copay

EASY ACCESS

- Access to America’s largest vision care network², offering convenient evening and weekend hours
- Online provider lookup and eligibility check
- Local providers who have sample safety frames for try-on
- Same-day turnaround available at many locations
- Get in-network, online access to safety frames at Glasses.com.
 - Simply select “EyeMed-Safety” in the vision carrier field to apply your insurance benefits

Keep your members’ eyes safe at work — Contact your DeltaVision® rep

¹ Workplace Eye Protection; The Vision Council; thevisioncouncilfoundation.org; 2024.

² EyeMed internal book of business analysis, 2023.

Benefit	Network benefits
Frames every 12 months¹	
Any available frame at provider location	\$100 allowance, then 20% off balance
Standard Plastic Lenses every 12 months	
Single vision / Bifocal / Trifocal / Lenticular	\$0 Copay
Standard Progressive Lens	Member pays \$65
Premium Progressive Lens	Member pays \$65, 80% of charge, less \$120 allowance
Lens Options every 12 months: (in addition to copay for Standard Plastic Lenses)	
UV Treatment / Tint / Standard Plastic Scratch Resistance	Member pays \$15 each
Standard Polycarbonate - Adults	\$0 Copay
Standard Anti-Reflective Coating	Member pays \$45
Polarized	20% off retail price
Other add-ons and services	20% off retail price
Non-network reimbursement²	
Frames	\$55
Single vision lenses	\$25
Lined bifocal lenses	\$40
Lined trifocal lenses	\$55
Lenticular lenses	\$55
Progressive lenses	\$40

Please contact your Northeast Delta Dental representative for rate information

¹ Frames and Lenses must be purchased as a complete pair and are allowed once every 12 months.

² Non-Network Reimbursement will be the lesser of the listed amount or the member’s actual cost from the non-network provider.

For product information, quotes, and questions regarding plan design options,
contact your producer or Northeast Delta Dental representative.



Northeast Delta Dental

Delta Dental Plan of Maine

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Saco, ME 04072-9674
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Fax: 207-282-0505

Delta Dental Plan of New Hampshire

One Delta Drive
PO Box 2002
Concord, NH 03302-2002
Telephone: 603-223-1000
Fax: 603-223-1129

Delta Dental Plan of Vermont

12 Bacon Street
Suite B
Burlington, VT 05401-6140
Telephone: 802-658-7839
Fax: 802-865-4430

www.nedelta.com

DeltaVision is underwritten by Red Tree Insurance Company, Inc., a Northeast Delta Dental company. Claims processing, claims service, and provider network administration for DeltaVision are provided under contract, by EyeMed Vision Care, LLC and its affiliate, First American Administrators, Inc.