



LOCAL 22 FIRE FIGHTERS & PARAMEDICS HEALTH PLAN

HEALTH PLAN

Dear Member:

Philadelphia Firefighters and Paramedics Health Plan- Local 22 is pleased to announce the placement of your vision care program with National Vision Administrators, LLC (NVA), effective February 1, 2025.

Enclosed please find two (2) identification cards to be utilized when obtaining eye care benefits. **It is recommended that you contact your eye care provider prior to scheduling your appointment to confirm the provider participates with NVA or you can contact NVA's Customer Service department to confirm the provider participates in your vision plan.** You can locate NVA participating providers by visiting NVA's website at www.e-nva.com or download NVA's mobile app by searching NVA Vision or contact NVA's Customer Service department toll free at: 1-800-672-7723. You have the option to utilize an out-of-network provider under your plan, however you will be responsible for 100% of the cost at the time of service.

When making an appointment with an NVA Participating Provider, please notify them that your coverage is administered by NVA and Sponsored by **Philadelphia Firefighters and Paramedics Health Plan- Local 22, Sponsor #4279**. The provider will telephone NVA to verify your vision care eligibility.

We have enclosed for your reference a brochure which describes the vision care program and a plan comparison, so you will see the enhancements we made to the vision plan. Please take a few minutes to read through this brochure and plan comparison and familiarize yourself with this program.

Please review the identification card to ensure all information on the card is accurate. If there are any errors, please contact NVA immediately.

We are confident that you will find NVA most beneficial to you and your eligible family members for vision care. If you have any questions about the NVA program, please feel free to contact NVA's Customer Service department toll-free at: 1-800-672-7723.

Sincerely,

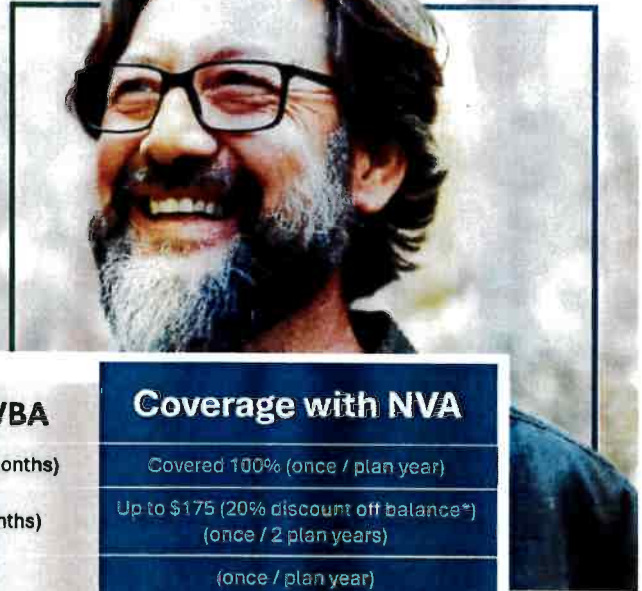
Board of Trustees



See Happy with NVA: Your Improved Vision Benefits



Your vision care just got better! We're excited to present an enhanced vision care experience with NVA. Discover how your new vision benefits provide more comprehensive coverage, greater frame allowances, and expanded lens options - all designed to support your eye health and lifestyle.



Benefits

Eye Examination

Frame

Lenses

- Single Lenses
- Bifocal Lenses
- Trifocal Lenses
- Lenticular Lenses
- Blended Bifocal (Segment)

Lens Options

- Polycarbonates
- Progressives - Tier 1
- Progressives - Tier 2
- Progressives - Tier 3
- Progressives - Tier 4
- Glass Photogrey
- Standard Transitions
- Standard Scratch Coating
- UV Coatings
- Solid Tints
- Fashion Gradient Tints
- AR Coatings - Tier 1
- AR Coatings - Tier 2
- AR Coatings - Tier 3

Contact Lenses

Elective Lenses

Fit/Follow-Up

- Standard Daily Wear
- Standard Extended Wear
- Specialty Wear

Medically Necessary

LASIK

Coverage with VBA

Covered 100% (once / 12 months)

Up to \$125 (once / 24 months)

(once / 12 months)

Covered 100%

(once / 12 months)

Covered 100% (under age 19)

- Covered 100%
- Covered 100%
- Covered 100%
- Covered 100%
- Covered 100%
- Not Covered
- Not Covered
- Covered 100%
- Covered 100%
- Covered 100%
- Covered 100%
- Not Covered
- Not Covered
- Not Covered

(Once every 12 months - in lieu of all other materials and services)

Up to \$160 (this contact allowance applies to the services below (contact lens fit and follow-up services)

Up to \$160 as specified above

Usual, Customary & Reasonable

Up to 80% of \$2,000 per eye (once per lifetime)

Coverage with NVA

Covered 100% (once / plan year)

Up to \$175 (20% discount off balance*) (once / 2 plan years)

(once / plan year)

Covered 100%

(once / plan year)

- Covered 100%
- Covered 100%
- Covered 100%
- Covered 100%
- \$20 Copay
- Covered 100%
- \$35 Copay
- Covered 100%
- Covered 100%
- Covered 100%
- Covered 100%
- Covered 100%
- Covered 100%
- Covered 100%
- Covered 100%

(Once every plan year - in lieu of lenses)

Up to \$160 Retail (15% discount** (Conventional) or 10% discount** (Disposable) off balance)

- \$20 Copay
- \$30 Copay
- \$50 Copay

Covered 100%***

Up to 80% of \$2,000 per eye (once per lifetime)****

*Does not apply at Wal-Mart/Sam's Club locations or certain proprietary brands. **Does not apply at Wal-Mart/Sam's Club locations, Contact Fill, or certain locations such as Target, Sears, Pearle and K-Mart and may be prohibited by certain manufacturers. ***Pre-approval from NVA required. ****Member is eligible once per lifetime. Member is not eligible for frames & lenses for 2 years. © 2024. All Rights Reserved. The NVA logo and Vision Benefits. Smarter. are registered marks of National Vision Administrators, L.L.C. V12092024





Your NVA Vision Benefit Summary

Schedule of Vision Benefits

Examination Once Every Plan Year	<ul style="list-style-type: none"> Covered 100% 	Reimbursed Amount <ul style="list-style-type: none"> Up to \$36
Lenses Once Every Plan Year	Standard Glass or Plastic	
<ul style="list-style-type: none"> Single Vision Bifocal Trifocal Lenticular Polycarbonates 	<ul style="list-style-type: none"> Covered 100% 	<ul style="list-style-type: none"> Up to \$32 Up to \$65 Up to \$65 Up to \$65
<ul style="list-style-type: none"> Progressives – Tier 1 Progressives – Tier 2 Progressives – Tier 3 Progressives – Tier 4 Glass Photogrey 	<ul style="list-style-type: none"> Covered 100% Covered 100% Covered 100% \$20 Copay Covered 100% 	<ul style="list-style-type: none"> Up to \$25 (SV) Up to \$30 (Bi/Tri) Up to \$50 Up to \$80 Up to \$100 Up to \$120
<ul style="list-style-type: none"> Standard Transitions 	<ul style="list-style-type: none"> \$35 Copay 	<ul style="list-style-type: none"> Up to \$20 (SV) Up to \$30 (Bi/Tri) Up to \$65 (SV) Up to \$70 (Bi/Tri) Up to \$10
<ul style="list-style-type: none"> Standard Scratch Coating UV Coatings Blended Bifocal (Segment) Solid Tints Fashion Gradient Tints AR Coatings – Tier 1 AR Coatings – Tier 2 AR Coatings – Tier 3 	<ul style="list-style-type: none"> Covered 100% Covered 100% Covered 100% Covered 100% Covered 100% Covered 100% Covered 100% Covered 100% 	<ul style="list-style-type: none"> Up to \$12 Up to \$30 Up to \$10 Up to \$12 Up to \$40 Up to \$50 Up to \$65
Frame Once Every Two Plan Years	Retail Allowance <ul style="list-style-type: none"> Up to \$175[Ⓞ] (20% discount off balance)* 	<ul style="list-style-type: none"> Up to \$40
Contact Lenses Once Every Plan Year	In lieu of Lenses	In lieu of Lenses
Elective Contact Lenses	<ul style="list-style-type: none"> Up to \$160 Retail[Ⓞ] (15% discount (Conventional) or 10% discount (Disposable) off balance)** 	<ul style="list-style-type: none"> Up to \$160
Fit/Follow-Up***		
Standard Daily Wear	<ul style="list-style-type: none"> Covered 100% after \$20 copay 	<ul style="list-style-type: none"> Up to \$20
Standard Extended Wear	<ul style="list-style-type: none"> Covered 100% after \$30 copay 	<ul style="list-style-type: none"> Up to \$30
Specialty Wear	<ul style="list-style-type: none"> Covered 100% after \$50 copay 	<ul style="list-style-type: none"> Up to \$50
Medically Necessary****	<ul style="list-style-type: none"> Covered 100% 	<ul style="list-style-type: none"> Up to \$300
Lasik***** Once Per Lifetime	<ul style="list-style-type: none"> Up to 80% of \$2000 per eye 	<ul style="list-style-type: none"> Up to 80% of \$2000 per eye

Philadelphia Firefighters & Paramedics Health Plan – Local 22

Effective 02/01/2025

Group Number# 4279

How Your Vision Care Program Works

Eligible members and dependents are entitled to receive a vision examination and one (1) pair of lenses once every plan year and a frame once every two plan years or contact lenses and contact lens evaluation/fitting once every plan year.

For your convenience, at the start of the program, you will receive two identification cards with participating providers in your zip code area listed on the back. At the time of your appointment, simply present your NVA identification card to the provider or indicate that your benefit is administered by NVA. The provider will contact NVA to verify eligibility. A vision claim form is not required at an NVA participating provider.

Be sure to inform the provider of your medical history and any prescription or over-the-counter (OTC) medications you may be taking.

To verify your benefit eligibility prior to calling or visiting your eye care professional, please visit our website at www.e-nva.com or download our mobile app by searching NVA Vision or contact NVA's Customer Service Department toll-free at 1.800.672.7723, TTY: 711 or NVA's Interactive Voice Response (IVR). Customer Service is available 24 hours a day, 7 days a week, 365 days a year. Any question any time.

If you are not a registered subscriber, you can still search our providers online by selecting the "Find a Provider" link on our home page. Enter group number 4279000001 or the group number on the identification card and enter in your search parameters. It's that easy!

*Does not apply to Wal-Mart / Sam's Club locations or for certain proprietary brands.

**Does not apply to Wal-Mart/Sam's Club, Contact Fill (NVA Mail Order) or certain locations at: Target, Sears, Pearle, & K-Mart and may be prohibited by some manufacturers.

***Only covered if you choose Contact Lenses.

****Pre-approval from NVA required.

*****Member is eligible once per lifetime. Member is not eligible for lenses & frames or contacts for 2 years.

Ⓞ Includes frames up to \$72 every day low price-price point at Walmart/Sam's Club locations.

Ⓞ\$112 every day low price-price point for contact lenses at Walmart/Sam's Club locations.



Get a Better View

Due to their everyday low prices (EDLP) the amounts listed below may not be applicable at Wal-Mart/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:

▪ \$75 Polarized	\$55 High Index	\$140 Progressive – Tier 5
▪ \$40 Blue Light Blocker (Standard)	\$80 AR Coating – Tier 4	\$165 Progressive – Tier 6
▪ \$60 Blue Light Blocker (Premium)	20% discount AR Coating – Tier 5	\$190 Progressive – Tier 7
▪ \$150 Blue Light Blocker (Ultra)	\$39 Retinal Scan	20% discount Progressive – Tier 8

For lens options & services purchased from a participating NVA provider, NVA members will only pay the fixed maximum amount or the provider's Usual and Customary (U&C) charge less 20%, whichever is less. Options not listed will be priced by NVA providers at 20% off the Provider's Retail (U&C) price. Fixed prices are available in-network only. In certain states, members may be required to pay the full retail amount and not the negotiated discount amount at certain participating providers. Some optometrist affiliated with Optical Retail locations (i.e., Walmart, Visionworks, etc.) are independent providers and may not participate in the NVA program.

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.

Plan Specific Details Online: The NVA website is easy to use and provides the most up to date information for program participants:

-Locate a nearby participating provider by name, zip code, or City/State, Verify eligibility for you or a dependent

-View benefit program and specific detail, Review claims, Print ID cards (when applicable), Nominate a non-participating provider to join the NVA network

Examinations: The comprehensive exam includes case history, examination for pathology or anomalies, visual acuity (clearness of vision), refraction, tonometry (glaucoma test) and dilation (if professionally indicated).

Lenses: NVA provides coverage in full for standard glass or plastic eyeglass lenses.

Frames: Select any frame from the participating provider's inventory. Any amount in excess of your plan allowance is the member's responsibility. Frame choices vary from office to office. (Visit NVA's website to view the Benefit maximizer Program)

Contact Lenses: The contact lens benefit includes all types of contact lenses such as hard, soft, gas permeable and disposable lenses. Medically necessary contact lenses includes fitting and follow up and may be covered with prior authorization when prescribed for: post cataract surgery, correction of extreme visual acuity problems that cannot be corrected to 20/70 with spectacle lenses, Anisometropia or Keratoconus.

Non-Participating Providers: You will be responsible for one hundred percent (100%) of the cost at the time of service at a non-participating provider. You can request a claim form from NVA via the website www.e-nva.com or you may submit receipts along with a letter containing the member's full name, patient's full name, address, ID# and sponsoring organization to NVA, P.O. Box 2187, Clifton, NJ 07015.

Laser Eye Surgery: NVA has chosen The National LASIK Network to serve their members. This network was developed by LCA Vision in 1999 and is one of the largest panels of LASIK surgeons in the U.S. Members are entitled to significant discounts and a free initial consultation with all in-network providers.

Discounts: In addition to your funded benefit you are eligible to access the EyeEssential® Plan discount (in Network Only) on additional purchases during the plan period. Please see table for more detail regarding NVA's discount plan:

*Discount is not applicable to mail order; however, you may get even better pricing on contact lenses through Contact Fill.

Your NVA EyeEssential® Plan Discount – In Network Only		
Service	Participating Provider	Lens Options
Eye Examination:	Member Cost: Retail Less \$10	\$12 Solid Tint/ Gradient Tint \$50 Standard Progressive Lenses \$75 Polarized Lenses \$65 Transitions Single Vision Standard \$70 Transitions Multi-Focal Standard \$15 Standard Scratch Coating \$12 UV Coating \$35 Polycarbonate \$45 Standard Anti-Reflective
Contact Lens Fitting:	Retail Less 10%	
Lenses:	Glass or Plastic	
Single Vision	\$35.00	
Bifocal	\$55.00	
Trifocal or Lenticular	\$70.00	
Frame:	Retail Less 35%	
Contact Lenses*:	Member Cost:	
Conventional	Retail Less 15%	
Disposable	Retail Less 10%	

Lens options purchased from a participating NVA provider will be provided to the member at the amounts listed in the fixed option price list above.

Options not listed will be priced by NVA providers at 20% off the Provider's Retail (U&C) price.

Wal-Mart / Sam's Club Stores: Due to their everyday low prices (EDLP) Wal-Mart / Sam's Club stores do not provide additional discounts.

Some optometrist affiliated with Optical Retail locations (i.e. Walmart, Visionworks, etc.) are independent providers and may not participate in the NVA program.

At NVA, We Work Only for Our Clients.

Exclusions / Limitations: No payment is made for medical or surgical treatments / Rx drugs or OTC medications / non-prescription lenses / two pair of glasses in lieu of bifocals / subnormal visual aids / 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.

National Vision Administrators, L.L.C. • PO Box 2187 • Clifton, NJ 07015

Web: www.e-nva.com • Toll-Free: 1.800.672.7723

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This document is intended as a program overview only and is not a certified document of the individual plan parameters.





DID YOU KNOW?

There's no need to submit a claim when ordering contact lenses from *Contact Fill*.



- Contact Fill is an NVA **in-network provider***
- Discounted brand-name contact lenses
- **Free shipping** on first order with code **SHIP4FREE**
- Prescription verification made easy***
- FSA & HSA payments accepted



TO ORDER YOUR LENSES:

Go to www.contactfill.com or scan QR code
Call 866-234-1393 (8am to 9pm, ET daily) for live help



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*Benefit availability depends on eligibility and plan's participation
**Valid contact lens prescription req'd