



DeltaVision[®]
Aiming for 20/20 vision!
(see inside for details)



DeltaVision[®]
Product Brochure
Insured Vision Plans

Welcome to DeltaVision®



Help your employees see clearly. Add a DeltaVision plan today. A DeltaVision plan will help your employees see with 20/20 vision.

- DeltaVision is supported by the nationwide EyeMed Vision Care Access Network, including private practitioners and the most popular retail and online retail locations, including:

INDEPENDENT
PROVIDER
NETWORK



LENSCRAFTERS

PEARLE
VISION

OPTICAL

- 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 locator at member.eyemedvisioncare.com/nedd

Only One Plan Design per Dealership

Available in Contributory (50% - 100%)
or Voluntary (0% - 49%)

- \$130 Hardware Only Benefit Plan
- \$180 Hardware Only Benefit Plan

See Plan Summaries on pages 4 & 5

To Enroll a Group

Provide the following to VADA prior to the first of the month in which the coverage is to be effective:

- An application to join completed and signed by the employer.
- Completed enrollment forms for all enrolling employees.
- A binder check for the first month's premium.



Our Guarantee

The Service: Smooth Implementation of a DeltaVision Plan.

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

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.

Why Choose DeltaVision?

Insured vision plans from Northeast Delta Dental*



- DeltaVision offers a network with a broad mix of independent providers, local optical retailers, and nationally-recognized retailers (where approximately 60% of all vision care dollars are spent), to include:







- Members are free to see the optical provider of their choice, either in- or out-of-network.
- Members receive the most value from their DeltaVision benefits when they receive care from in-network providers.
- Members can apply their vision benefit to any brand of frame, lenses or contact lenses at the provider location they choose.
- 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 of our provider locations.
- Our Contact Lens by Mail program allows members to order replacement contact lenses on-line and have them delivered directly to their homes.
- Members have access to live customer service 102 hours per week (the most in the industry), including nights and weekends, from a world-class customer services team boasting an annual member satisfaction rate of 95%.
- ID cards include a summary of the plan design and a listing of local in-network providers based on the member's ZIP code.



VADA

130 Frame - 130 Lenses

Effective Date: January 1, 2022

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Hardware Plan

DeltaVision Plan Summary	Network Benefits	Non-Network Reimbursement
*Frames every 24 months:		
Any available frame at provider location	\$130 allowance, then 20% off balance	\$65
Standard Plastic Lenses every 12 months:		
Single vision / Bifocal / Trifocal	Member co-pay \$20, plan pays balance	\$25 / \$40 / \$55
Lens Options		
UV coating / Tint / Standard scratch resistance	Member co-pay \$15 each	None
Standard polycarbonate	Member co-pay \$40	None
Standard anti-reflective coating	Member co-pay \$45	None
Standard progressive	Member co-pay \$75	None
Premium progressive	\$75 co-pay, 80% of charge less \$120 allowance	None
Other add-ons and services	20% off retail price	None
*Contact Lenses every 12 months:		
In lieu of spectacle lenses; allowance covers materials only.		
Conventional	\$130 allowance, then 15% off balance	\$104
Disposable	\$130 allowance, member pays balance	\$104
Medically necessary	Paid in full	\$200
Laser Vision Correction - Lasik or PRK	15% off retail price or 5% off promotional price	None

*Frame and Contact allowance are one-time-use benefits during the frequencies shown.

Additional In-Network Discounts

- 20% discount on items not covered by the plan at network providers, which may not be combined with any other discounts or promotional offers, and the discount does not apply to EyeMed provider's professional services, or contact lenses. Retail prices may vary by location.
- Members also receive a 40% discount off complete prescription eyeglass purchases and a 15% discount off conventional contact lenses once the funded benefit has been used.
- ContactsDirect.com and Glasses.com give members access to on-line retailers where benefits can be used. Visit these websites for additional information.
- Discounts do not apply for benefits provided by other group benefit plans.

To locate a participating EyeMed Access Network provider, log on to member.eyemedvisioncare.com/nedd or call 1-866-723-0513.



VADA

180 Frames - 180 Lenses

Effective Date: January 1 - December 31, 2024

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Hardware Plan

DeltaVision Plan Summary	Network Benefits	Non-Network Reimbursement
*Frames every 24 months:		
Any available frame at provider location	\$180 allowance, then 20% off balance	\$90
Standard Plastic Lenses every 12 months		
Single vision / Bifocal / Trifocal	Member co-pay \$20, plan pays balance	\$25 / \$40 / \$55
Lens Options		
UV coating / Tint / Standard scratch resistance	Member co-pay \$15 each	None
Standard polycarbonate	Member co-pay \$40	None
Standard anti-reflective coating	Member co-pay \$45	None
Standard progressive	Member co-pay \$75	None
Premium progressive	\$75 co-pay; 80% of charge less \$120 allowance	None
Other add-ons and services	20% off retail price	None
*Contact Lenses every 12 months:		
In lieu of spectacle lenses. Allowance covers materials only.		
Conventional	\$180 allowance, then 15% off balance	\$144
Disposable	\$180 allowance, member pays balance	\$144
Medically necessary	Paid in full	\$200
Laser Vision Correction - Lasik or PRK	15% off retail price or 5% off promotional price	None

*Frame and Contact allowance are one-time-use benefits during the frequencies shown.

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This document is intended to be only a summary description of the program benefits. It is not intended to describe all terms, conditions and limitations of the coverage. Please refer to the Vision Plan Description (VPD) for the actual terms, conditions and limitations of the coverage summarized in this document.

Hardware Only Plan

Vision Benefits*	\$130 Plans	\$180 Plans
Allowances:		
Frames	\$ 130	\$ 180
Contacts	\$ 130	\$ 180
Frequency (in months)		
Lenses or Contact Lenses	12	12
Frame	24	24
Copayments:		
Lenses	\$ 20	\$ 20

VOLUNTARY – Employer contributes 0% - 49% of employee rate

Monthly Rates

Employee Only	\$4.37	\$6.09
Employee + One Dependent	\$7.49	\$10.46
Family	\$13.41	\$18.69

CONTRIBUTORY – Employer contributes 50% - 100% of employee rate

Monthly Rates

Employee Only	\$3.02	\$4.75
Employee + One Dependent	\$5.18	\$8.16
Family	\$9.26	\$14.61

For product information and questions contact
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Northeast Delta Dental

Delta Dental Plan of Maine

1022 Portland Road
Suite Two
Saco, ME 04072-9674
Telephone: 207-282-0404
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: 603-223-1199

Delta Dental Plan of Vermont

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

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.