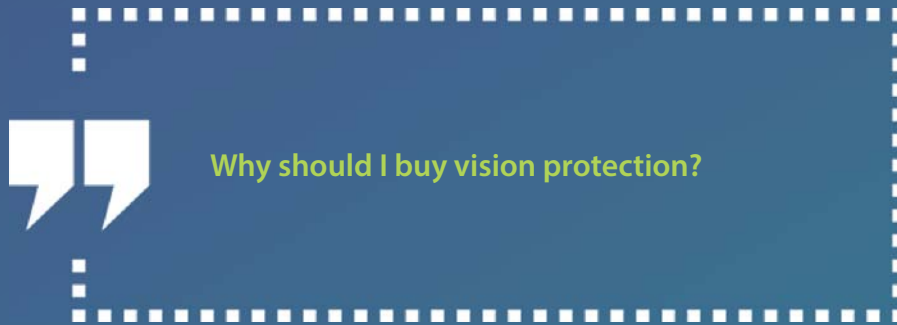




Why Gap Vision PlanSM

See more clearly.



Yearly eye exams are an easy and important way to protect your eyes and overall health. A routine eye exam can help detect signs of serious health conditions, like diabetes, a brain tumor and high cholesterol.¹

The Gap Vision Plan² is a great fit for families, people who want to get regular vision check-ups, or those that just want that extra layer of protection for some of their out-of-pocket costs due to vision exams, frames, lenses, and contacts.

**THIS IS NOT COMPREHENSIVE MAJOR MEDICAL INSURANCE.
THIS IS A VISION ONLY POLICY.**

¹What do your eyes say about your overall health. VSP. <https://www.vsp.com/comprehensive-eye-exam.html>.

² Insurance benefits are underwritten by Renaissance Life & Health Insurance Company of America, Indianapolis, IN and in New York by Renaissance Life & Health Insurance Company of New York, New York, NY. Both companies ("Renaissance") can be reached at PO Box 1596, Indianapolis, IN 46206. There is no ownership affiliation between Renaissance and Gap Dental & Vision. For complete coverage details, please refer to the certificate of insurance.

WHO WE ARE

United Business Association

The United Business Association (UBA) is a nationwide membership of small business owners and employees. UBA leverages our purchasing power to secure benefits and discounts not otherwise available on an individual basis. With group insurance programs, shared business knowledge, business and lifestyle benefits and services and opportunities to network, We are Better Togethersm. Your membership in the United Business Association allows you to access and enroll in any additional Gap Plan that provides an insured benefit. Various insurance companies have issued group limited benefit insurance policies to the United Business Association as the group master policyholder. Product features, additional plans and availability may vary by state.

Inside Gap Vision Member Guide:

pgs: 4-5

Group Vision Insurance

Well vision exams, lenses, glasses and additional benefits.

pgs: 6-7

Out-of-Network Coverage

Exams , frames and additional out-of-network coverage.

pgs: 8-9

Extra Savings & VSP Network

Learn how to make your coverage go further with VSP.

pgs: 10-11

Find a Vision Provider

Look up an in-network vision provider using the link.

pgs: 12-15

Exclusions, Limitations, Claims Information & Other Important Membership Details

Find out what is not covered by reviewing the exclusions and limitations for Group VisionInsurance (pgs 11). Find out how to file a claim (pg 12-13) and learn about other important membership details like refund / cancellation policy for UBA (pgs 13-15).

Insurance benefits are underwritten by Renaissance Life & Health Insurance Company of America, Indianapolis, IN and in New York by Renaissance Life & Health Insurance Company of New York, New York, NY. Both companies ("Renaissance") can be reached at PO Box 1596, Indianapolis, IN 46206. There is no ownership affiliation between Renaissance and Gap Dental & Vision. For complete coverage details, please refer to the certificate of insurance.

Group Vision Insurance

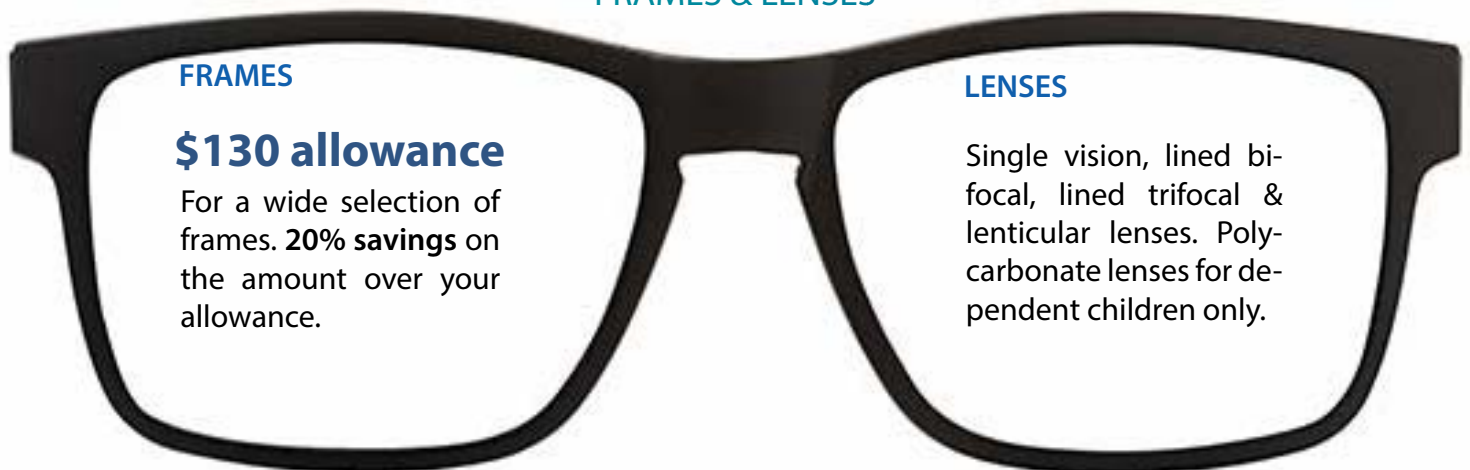
Coverage is available to paid Members of the United Business Association after the effective date listed in your welcome letter following the receipt of the Membership application and the payment of the first month's dues to the United Business Association.

GROUP VISION INSURANCE+ IN-NETWORK COVERAGE

Well Vision Exam	COPAY & FREQUENCY \$10.00 Every 12 months
Prescription Glasses	\$25.00 See Frames & Lenses below Every 12 months

+Insurance benefits are underwritten by Renaissance Life & Health Insurance Company of America, Indianapolis, IN and in New York by Renaissance Life & Health Insurance Company of New York, New York, NY. Both companies ("Renaissance") can be reached at PO Box 1596, Indianapolis, IN 46206. There is no ownership affiliation between Renaissance and Gap Dental & Vision. For complete coverage details, please refer to the certificate of insurance.

FRAMES & LENSES*



FRAMES

\$130 allowance

For a wide selection of frames. **20% savings** on the amount over your allowance.

LENSES

Single vision, lined bi-focal, lined trifocal & lenticular lenses. Poly-carbonate lenses for dependent children only.

***Included in Prescription Glasses**

The information is a limited description of the plan highlights. For more details, limitations, exclusions and definitions, please refer to the Certificate.

Did You Know?

Approximately 14 million Americans aged 12 years and older have self-reported visual impairment defined as distance visual acuity of 20/50 or worse. Among them, more than 11 million Americans could have improved their vision to 20/40 or better with refractive correction.³

Stats Taken from:

³ <https://www.cdc.gov/visionhealth/data/national.htm>



ADDITIONAL VISION BENEFITS

LENS ENHANCEMENTS

Progressive Lenses:

- | | |
|------------|-------------|
| ✓ Standard | \$55 |
| ✓ Premium | \$95-\$105 |
| ✓ Custom | \$150-\$175 |

Every 12 months

(Average Savings of 20-25% for other lens enhancements)

CONTACTS (instead of glasses)⁴

- ✓ **COPAY UP TO \$60**
applies to contact evaluation and fitting - every 12 months.
- ✓ \$130 Allowance for contacts; copay does not apply.
- ✓ Contact lens exam (evaluation and fitting) - Medically Necessary covered in full after \$25 copay.

⁴When Contact Lenses are obtained, the Covered Person shall not be eligible for lenses and frames again in the next 12 months.



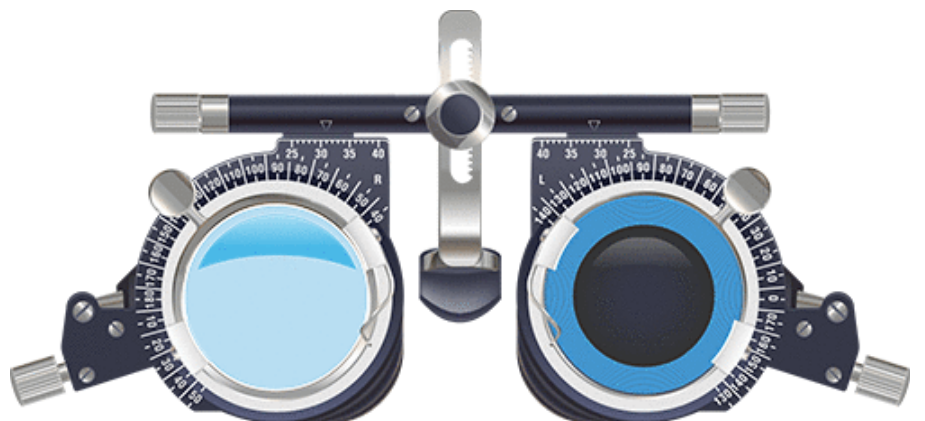
Out-of-Network Coverage⁵

Exam

Up to \$45

Frames

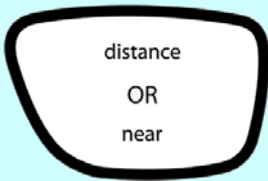
Up to \$70



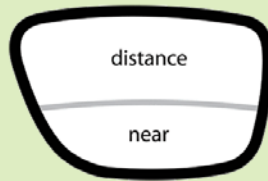
⁵Coverage with a retail chain affiliate may be different.



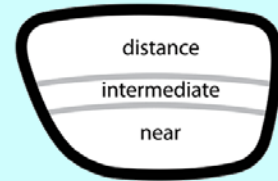
ADDITIONAL OUT-OF-NETWORK COVERAGE⁶



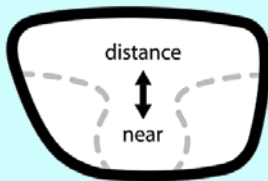
SINGLE VISION LENSES
Up to \$30



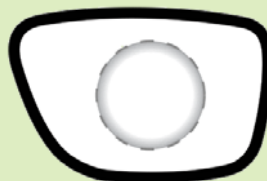
LINED BIFOCAL LENSES
Up to \$50



LINED TRIFOCAL LENSES
Up to \$65



PROGRESSIVE LENSES
Up to \$50



LENTICULAR LENSES
Up to \$100



CONTACTS⁷
Up to \$105

⁶Visit www.vsp.com for details if you plan to see a provider other than a VSP Doctor.

⁷Contact Lenses - (necessary - \$210)



VSP Network

With over 78 million members and more than 33,000 doctors, **VSP boasts the largest national network of independent eye doctors.**⁸ Eye care professionals partner with VSP to deliver the best patient experience. You'll be thrilled by the large selection of eyewear available to you, from classic styles to trendy frames, and you'll find hundreds of options to choose from. Frames include dozens of top brand names, so you can find one that fits your personality.

To find an optometrist who is right for you visit www.vsp.com. At your first appointment, simply tell the office you have VSP coverage. The VSP participating provider's office will easily be able to look up your specific coverage.

⁸VSP internal data.

VISION COVERAGE THROUGH VSP EYE DOCTORS

The best eye doctors provide the best care. VSP carefully chooses eye doctors based on their professional licensing, work history, education, professional liability and ethics. Vision members will receive quality care with an eye exam from a VSP doctor.

CERTIFIED CARE

- ✓ VSP optometrists are Therapeutic Pharmaceutical Agent (TPA) certified and ophthalmologists are American Board of Ophthalmology (ABO) certified.

EXCELLENT STANDARDS

- ✓ The VSP credentialing process complies with the National Committee for Quality Assurance (NCQA) standards.

ALL VSP DOCTOR LOCATIONS:

- ✓ Accept New Patients
- ✓ Provide a WellVision Exam
- ✓ Offer a Wide Selection of Contact Lenses & Frames

EXTRA SAVINGS



GLASSES / SUNGLASSES⁹



CONTACTS¹⁰



LASER VISION CORRECTION¹¹

⁹**20% savings** on additional glasses / sunglasses, including lens enhancements, from any VSP doctor within 12 months of your WellVision Exam.

¹⁰ **5% savings** on a contact lens exam (fitting and evaluation)

¹¹ Average 15% off the regular price or 5% off the promotional price, discounts only available from contracted facilities.



Did You Know?

More than 150 million Americans use corrective eyewear to compensate for refractive errors. Americans spend more than \$15 billion each year on eyewear.¹²

¹² Stats Taken from: Eye Health Statistics - American Academy of Ophthalmology

<https://www.aao.org/newsroom/eye-health-statistics> | Vision Problems in U.S: Prevalence of Adult Vision Impairment & Age-Related Eye Diseases in America. Prevent Blindness America and the National Eye Institute, 2008.



FREEDOM OF CHOICE

Choose your VSP Eye Care Professional.

SCAN CODE BELOW TO VIEW
VISION PROVIDERS



or go to link:

www.vsp.com

State Availability

Gap Vision PlanSM is available in the following states:

AL, AR, AZ, CA, GA, KS, MI, MS, OK, & TX

The following monthly insurance rates apply to coverage underwritten by Renaissance Life & Health Insurance Company of America and Renaissance Life & Health Insurance Company of New York.

Insurance rates for the Gap Vision Plan:

Ind: \$14 Ind+1: \$27 Family: \$43



Limitations & Exclusions

Group Vision Insurance

READ THE CERTIFICATE CAREFULLY.

1. **Patient Options:** This plan is designed to cover visual needs rather than cosmetic materials. When the Covered Person selects any of the following extras, the Plan will pay the basic cost of the allowed lenses or frames, and the Covered Person will pay the additional costs for the options.
 - Optional Cosmetic Processes
 - Anti-Reflective Coating
 - Color Coating
 - Mirror Coating
 - Scratch Coating
 - Blended Lenses
 - Cosmetic Lenses
 - Laminated Lenses
 - Oversize Lenses
 - Polycarbonate Lenses
 - Photochromic Lenses, Tinted Lenses except Pink #1 and Pink #2
 - Progressive Multifocal Lenses
 - UV (ultraviolet) Protected Lenses
 - Certain Limitations on Low Vision Care
2. **Not Covered:** There are no Benefits for professional services or materials connected with
 - Orthoptics or Vision Training and any associated Supplemental Testing
 - Plano Lenses (less than a $_ .50$ diopter power)
 - Two Pair of Glasses in Lieu of Bifocals
 - Replacement of Lenses and Frames furnished under this Plan that are lost or broken, except at the normal intervals when services are otherwise available.
 - Medical or Surgical Treatment of the Eyes
 - Corrective Vision Treatment of an Experimental Nature.
 - Costs for Services and / or Materials above stated allowances
 - Services and / or Materials not indicated in the Certificate as covered plan benefits.
 - Contact Lens Modification, Polishing or Cleaning
 - Local, State and / or Federal Taxes, except where Renaissance or VSP are required by law to pay.
 - Replacement of lost or damaged contact lenses, except at the normal intervals when services are otherwise available.
3. Some brands of spectacle frames may be unavailable for purchase as Benefits, or may be subject to additional limitations. Covered Persons may obtain details regarding frame brand availability from their In-Network Provider or by calling the Vision Member Services Department at 1-800-877-7195.
4. Exclusions and limitations of benefits described for In-Network Providers shall also apply to services rendered by Affiliate Providers. Services from an Affiliate Provider are in lieu of services from In-Network Provider or an Out-of-Network Provider. VSP is unable to require Affiliate Providers to adhere to its quality standards. Where Affiliate Providers are located in membership retail environments, Covered Persons may be required to purchase a membership in such entities as a condition of obtaining Benefits.

The above is a summary of exclusions and limitations. For complete details, please refer to your Certificate. Not all coverage provided under the Certificate is set forth above. The policy term is one year. Coverage may be terminated for reasons stated in the Certificate. Coverage ceases upon termination of the Certificate.

LOW VISION

Professional Services for severe visual problems not correctable with regular lenses, including:

- Supplemental Testing: Up to \$125¹⁴** - Includes Evaluation, Diagnosis & Prescription of Vision Aids where indicated.
- Supplemental Aids: 75% of Affiliate Provider's Fee up to \$1,000.¹⁴**

¹⁴ Maximum Benefit for all Low Vision services and materials is \$1,000.00 every two (2) years and a maximum of two supplemental tests within a two-year period. Low Vision Services are a Covered Service when specific benefit criteria are satisfied and when prescribed by Covered Person's Provider.



How to File a Vision Claim?



United Business Association Claims Unit

Renaissance Life & Health Insurance Company of America

PO Box 17250, Indianapolis, IN 46217

Eligibility & Benefit Info: 888.358.9484

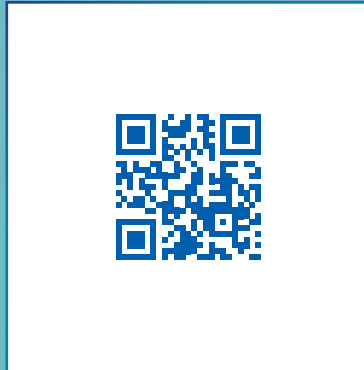
*To receive Covered Services from an In-Network Provider, Covered Person should select an In-Network Provider, schedule an appointment and inform the Provider's office that you are a Covered Person under this vision plan. The In-Network Provider will then obtain a Benefit Authorization prior to the time services are rendered or materials ordered. Services must be obtained before the expiration date of the Benefit Authorization. If a Covered Person receives **Covered Services from an In-Network Provider WITHOUT a Benefit Authorization, any services or materials received from the In-Network Provider will be treated as if they were obtained from an Out-of-Network Provider.** If a Covered Person is eligible for and obtains **Benefits from an Out-of-Network Provider, Covered Person remains liable for the Out-of-Network Provider's full fee.** Covered Persons or Out-of-Network Providers may submit requests for reimbursement. Claims will be paid to Covered Persons or directly to Out-of-Network Providers when claims include a valid Assignment of Benefits. Claims may be denied if received 180 calendar days from the date services are rendered and/or materials provided.*

SCAN CODE BELOW TO VIEW STATE SPECIFIC
CERTIFICATES FOR GAP VISION PLAN
INCLUDING EXCLUSIONS



or go to link: gapplusplan.com/gapvision18certs.html

SCAN CODE BELOW TO DOWNLOAD
VISION
CLAIM FORM



or go to link:
gapplusplan.com/visionclaimform.pdf

Benefit payment is subject to the plan provisions, limitations, exclusions and other provisions within the Certificate. For more information and complete details of terms, conditions, limitations, and exclusions of coverage, please refer to the Certificate. Coverage may vary and may not be available in all states. Renaissance does not provide nor is affiliated with the discount programs provided as part of membership in the United Business Association.

UBA REFUND / CANCELLATION POLICY



If you are not completely satisfied with your UBA Gap Plan, **please call your Personal Member Concierge at 866.438.4274**. We will be happy to issue a complete refund of membership dues within the first thirty (30) days. We want you to be 100% satisfied with your UBA Gap benefits and services.

Note: This membership is separate from any other insurance or supplemental plan you have purchased. Please contact your agent for any plans other than the UBA Gap Membership Plan. If you are canceling, please make sure to cancel using our cancellation phone number at 866.438.4274 or our cancellation form located at <http://www.gapplusplan.com/billing.html>. **Please do not cancel through your agent**. Cancel directly with GAP to make sure your cancellation request is handled promptly and correctly.

Your UBA Membership

In order to purchase the Gap Vision PlanSM, you must be a member of the United Business Association. Below are some highlights of your UBA Membership Benefits. You can view the Member Guide for UBA Membership at: [http://www.gapplusplan.com/MemberGuideforErecept/ubamembershipguide18.pdf](http://www.gapplusplan.com/MemberGuideforEreceipt/ubamembershipguide18.pdf).

You can also download a quick reference chart that has all the codes needed to access your membership benefits. Download it to your phone, print a copy or save it to your computer.

Download UBA Membership Reference Sheet at: <http://www.gapplusplan.com/ubamembershipreference18.pdf>.



Add Even More Value to your Membership with These Additional Gap Plans



STM



GAP DENTAL



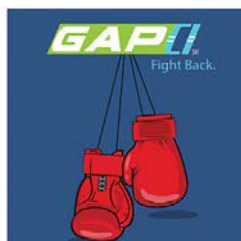
GAP VISION



GAP ER



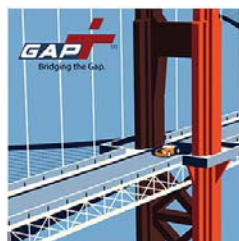
GAP AME



GAP CI



GAP HCI



GAP PLUS



GAP MAX



SUPER GAP

Learn More About Your UBA Benefits & Services

Questions? Call Your Personal Member Concierge at 866.438.4274



Great to Help Keep You Healthy

FREE One-A-Day Multi-Vitamins

FREE Shipping

Same Formulas as you find on Shelves at Supermarkets

One-A-Day Formulas are Complete from A-Z

Order them quickly & simply online

<https://form.jotform.com/53344061048954>

DON'T FORGET TO REVIEW & USE YOUR UBA MEMBERSHIP BENEFITS

MEMBERSHIP BENEFIT & SERVICES HIGHLIGHTS

- Free Vitamins
- MailMyPrescriptions.com®
- Retail Prescription Discount Card
- MeMD™ - Telemedicine 24/7*
- Pet RX Prescription Discount Card
- 24-Hr Nurse Helpline
- Lab Discounts
- Discount Hearing Service
- Gateway Medicaid
- Health Savings Account - HSA Bank®
- Travel Assistance Plan
- LensCrafters Vision Club
- GymAmerica.com
- 24-Hr Roadside Assistance
- TrueCar Buying Network
- Graduate Scholarship Program
- HopTheShops.com
- LegalConnect®
- TravelerBonus.com
- Child ID Card Services
- Car Rental Discounts
- ADP Payroll Processing
- 1800Flowers.com Discounts
- Office Supplies & Furniture
- Hewlett (HP) Computers & Equipment
- UPS Express Delivery Service
- UBA Savings Perks Program
- National Theme Park Discounts
- Business Owners Policy
- Data Breach / Cyber Liability



Great for Maintenance Medications

Wholesale Pharmacy Service

Pay ONLY WHOLESALE Cost of Your Prescriptions

No Insurance Required

Unlimited Usage

Pricing is Guaranteed

Use code **UBAMEMBERS** when ordering by phone or during online checkout to access your exclusive members-only promotions.



MeMD[™]
healthcare virtually anywhere

Great for When You Get Sick

Connect with a Medical Provider

Unlimited Free Visits For Members[^]

Consultations for Common Ailments

Available 24/7, 365 days a year

No More Long Waits Sitting in a Doctor's Office

Visit <http://www.memd.me/group/uba>

to access your unlimited visits

[^]Visits are paid by UBA.

WE PROUDLY SUPPORT



follow us



**YOUR PERSONAL
MEMBER CONCIERGE**

866-438-4274

- Order Vitamins
- Get Help with Plan Benefits
- Claim Forms
and more...



SIGN UP

Contact Your Agent Today!



Gap Vision
SampleGuide_v04.18[04218]