what's new online...
www.mycompbenefits.com

Explore the exciting new features that make it easier for you to find information and make changes to your CompBenefits vision plan.

- **Change Personal Information:** You can now access and change personal demographic information, such as your name and address, directly from your CompBenefits account.

- **Search for a Provider:** By registering at MyCompBenefits.com, you can easily search for a Provider in your area that accepts your specific plan.

- **ID Card:** You may print temporary ID Cards and request permanent ID Cards online.

- **Check the Status of a Claim:** It’s easy to check your claim status. Simply select the family member who received services and enter the time period to obtain a list of claims. From the list, click on the View option to see details on how the claim was paid.

- **Ask Questions about a Claim:** We’re here to answer any questions you may have. From the claims detail screen, click Claims Question. You’ll receive a response within one business day.

**How to Register Online: It’s fast and simple!**

**Step #1:** Go to www.mycompbenefits.com.

**Step #2:** Select Click here to Register Now!

**Step #3:** Type the requested information on the PIN Registration page and click Next.

**Step #4:** In the next page, enter your Member ID number.

**Step #5:** Enter your demographic information as it appears on your enrollment form or as indicated on your ID card. Click Submit.

**Member Access to Online Services**
**24 Hours a Day, 7 Days a Week**
What to expect from your vision plan:

Your eyesight is nothing to take for granted. It’s how we see a loved one’s face clearly or a beautiful sunset.

But your sight can begin to deteriorate over a long period of time without your knowing there is a problem.

As with any other important asset – like your home or car – wouldn’t you feel more at ease if you knew your routine eye care was covered by a company with decades experience helping people like you? With CompBenefits’ VisionCare Plan, you can take advantage of coverage you need for eye examinations and eyeglasses or contacts.

You can also choose to take advantage of VisionCare Plan’s deep discount for LASIK surgery.

And you won’t have to hunt hard to find a doctor close to your home or work. The VisionCare Plan network includes some 20,000 ophthalmologist and optometrist locations – one third of all private practitioners in the country. Yet, it doesn’t mean you can’t see an out-of-network doctor because VisionCare Plan offers benefits in-network or out-of-network. It’s your choice.

You’ll find what you need @ www.mycompbenefits.com

CompBenefits has made understanding and accessing your VisionCare Plan benefits simple. Just take a few moments to register at www.mycompbenefits.com, and you’ll have access to our VisionPass, which is necessary to take with you to your eye doctor appointment. Plus, you’ll see all of your benefits on screen, including the frequency of your benefits, frame and lens as well as contact lens allowances. You’ll have access to our database of 20,000 eye doctor locations through our Provider Locator.
Jacksonville University

Open your eyes to high-quality vision care! The average family spends close to $600 each year on routine eye health care. Using CompBenefits' VisionCare Plan, you will receive your routine eye health care with just a small copayment.

CompBenefits' VisionCare Plan provides benefits for covered:

- Eye health examinations
- Frames
- Eyeglass Lenses
- Contact Lenses

Plus you will receive:

- LASIK surgery discount
- Preferred member pricing for other frame and lens options*

When ordering from one of our network eye doctors, you will also receive in the year of your eye exam:

- A 20% discount on a second pair of eyeglasses
- A 15% discount on your contact lens fitting fee

**MONTHLY RATES**

<table>
<thead>
<tr>
<th>SERVICE FREQUENCY</th>
<th>COPAYMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vision exam:</td>
<td>Exam: $10</td>
</tr>
<tr>
<td>Lenses:</td>
<td>Materials: $25</td>
</tr>
<tr>
<td>Frame:</td>
<td></td>
</tr>
</tbody>
</table>

**SAVINGS! SEE THE DIFFERENCE**

You can save money two ways with VisionCare. First, the cost of plan services and materials is discounted and prepaid. **So except for any co-payments, you have no out-of-pocket expenses** for covered services and supplies when you use one of our network doctors. Second, your coverage costs are deducted from your pay before any federal income or FICA taxes are taken out. This makes your taxable wage base lower, so you would pay less tax.

Here's an example of how the plan helps you save over the course of a year:

<table>
<thead>
<tr>
<th>If You Get</th>
<th>You Pay:</th>
</tr>
</thead>
<tbody>
<tr>
<td>VisionCare Doctor</td>
<td>Typical Retail</td>
</tr>
<tr>
<td>Eye exam</td>
<td>.00</td>
</tr>
<tr>
<td>Frame (designer style)</td>
<td>.00</td>
</tr>
<tr>
<td>Lenses: Bifocal</td>
<td>.00</td>
</tr>
<tr>
<td>Option (pink tint #1 or #2)</td>
<td>.00</td>
</tr>
<tr>
<td>Co-payments:</td>
<td></td>
</tr>
<tr>
<td>$10 exam/$25 materials</td>
<td>$ 35.00</td>
</tr>
<tr>
<td>Premium ($6.50 monthly x 12)</td>
<td>+78.00</td>
</tr>
<tr>
<td>Pre-tax savings (assuming 15% tax bracket &amp; 7.65% FICA)</td>
<td>- 17.67</td>
</tr>
</tbody>
</table>

**YOUR TOTAL SAVINGS THROUGH VISIONCARE: 70% OFF RETAIL**

In this example, you would have saved **$224.67** in vision care costs with VisionCare Plan. Keep in mind, however, that your actual savings will depend on your plan allowances, your actual premium, the doctors and materials you select, and your own tax situation.

* This is not a schedule of maximum benefits. For example, the plan covers frames based on the manufacturer’s wholesale price guide. So while the retail price of a covered frame may vary among plan doctors, the value of your covered frame stays the same. Typically, the wholesale frame allowance is equivalent to a retail price of $80-150. You may be required to pay extra only if you choose a frame that exceeds the covered wholesale price.
HOW DOES VISIONCARE PLAN WORK?

You can choose a network provider at www.mycompbenefits.com. Depending on your plan, either you or your doctor will download a VisionPass Form from www.compbenefits.com. You must use the form in the time specified for services*. Visit your doctor, who will provide you with a comprehensive eye exam and order prescribed eyeglasses or contacts, if necessary.

Pay any copayments as well as any additional expenses for cosmetic items you have chosen. That’s the end of your “paperwork”. CompBenefits pays the doctor directly for his or her professional services. It’s as easy as that!

* If you do not use your form in the time specified for services, you won’t be able to download another until the next time you are eligible for benefits. However, you can request an extension from our Customer Care team at 800-865-3676.

CAN I GET CONTACTS INSTEAD OF LENSES?

Yes. If you prefer contacts instead of glasses, your vision exam is covered-in-full with your exam co-payment and VisionCare Plan provides a generous allowance of $105.00 to be applied towards your fitting and follow-up fees as well as materials costs. The Contact Lens allowance in LIEU OF THE LENS / FRAME BENEFIT and is provided with the same frequency as your lens benefit.

HOW DO I GET FURTHER QUESTIONS ANSWERED?

You may contact CompBenefits Customer Care Department with any questions or concerns at: 1-800-865-3676, Monday – Thursday 8am-8pm; and Friday 8am-6pm EST. or locate us on the web at www.mycompbenefits.com.
frequently asked questions

Q. What are CompBenefits’ VisionCare Plans?
A. CompBenefits’ VisionCare Plans are network-based vision plans that emphasize high quality routine eye health care from independent eye care professionals. Services and materials are provided on a pre-paid basis, and the plans pay network doctors directly. VisionCare Plan members can also use non-network doctors if they wish.

Q. How does VisionCare Plan work?
A. Members simply select any in-network optometrist or ophthalmologist and make their appointments. At the time of the appointment, members pay only their co-payments and for any extra cosmetic options selected. There are no forms to complete or claims to file.

Members can also choose an out-of-network provider. In this case, they pay their doctor at the time of the visit and submit receipts to CompBenefits for reimbursement. Benefits are paid according to a reimbursement schedule.

Q. Are there any limitations to my vision benefit?
A. Yes, there are a few. Oversized lenses, when prescribed, may be covered only when patient’s face size indicates they are necessary. Blended and progressive lenses are not normally required for visual welfare and are generally excluded. Elective or cosmetic items such as photochromic lenses, fashion color-coated lenses and sun lenses are not normally covered.

Q. Does VisionCare Plan exclude anything?
A. Yes, some items and services are excluded.
   • Orthoptics or vision training, subnormal vision aids or plano (non-prescription) lenses
   • Replacement of lost or broken lenses, except at the regularly-scheduled plan intervals
   • Medical or surgical treatment of the eyes
   • Care provided through or required by any government agency or program, including Workers’ Compensation or similar law

Q. What do I need to access my benefits?
A. You’ll need a CompBenefits VisionPass, which you can download from our Web site, www.mycompbenefits.com. You’ll take it to your eye doctor, and he or she will file it for you.

Some groups, however, may have a plan in which the eye doctor downloads your VisionPass for you. Check with your benefit administrator for more details on how you should obtain your VisionPass.

Q. Can I go online to find out more about my plan or get assistance?
A. Yes. You can visit www.mycompbenefits.com to learn about your plan, to check your benefits, to use our Provider Locator, to send us an e-mail and more.
The providers listed in this brochure are participating with the plan at the time of printing. Please check with the doctor of your choice or call our Customer Care department at 1-800-748-5855 when making your appointment to make certain he or she is currently a member doctor. You may also visit our website at www.complexbenefits.com for a nationwide listing of providers.

You must receive services from one of our participating providers in order to receive full benefits (as outlined in your vision care booklet). If you receive service from a provider who does not participate in the plan, you will receive reimbursement according to the non-panel reimbursement schedule established by your group.

**Vision Provider Directory**

**Baker, Clay, Columbia, Dixie, Duval, Hamilton, Lafayette, Nassau, Saint Johns, Suwannee and Union Counties**

The providers listed in this brochure are participating with the plan at the time of printing. Please check with the doctor of your choice or call our Customer Care department at 1-800-748-5855 when making your appointment to make certain he or she is currently a member doctor. You may also visit our website at www.complexbenefits.com for a nationwide listing of providers.

You must receive services from one of our participating providers in order to receive full benefits (as outlined in your vision care booklet). If you receive service from a provider who does not participate in the plan, you will receive reimbursement according to the non-panel reimbursement schedule established by your group.

**BAKER**

**Macclenny**

Euch, OD, Mary M
31 S 6th St
32063 (904)259-6259

Phillips, OD, Robert L
534 S 5th St
32063 (904)259-6797

**CLAY**

Green Cove Springs

Reed, OD, Joanne F
401 Bay St
32043 (904)529-7238

Keystone Heights

Minesinger, OD, James H
260 S Lawrence Blvd
32656 (352)473-2600

Middleburg

Allen, OD, Margaret A
1545 Branen Field Rd Ste 5
32068 (904)291-5800

Anquas, OD, Edwin N
1545 Branen Field Rd Ste 5
32068 (904)291-5800

Orange Park

Abshire, OD, Kyle D
784 Blanding Blvd Ste 100
32065 (904)272-3937

Abshire, OD, Kyle D
905 Park Ave Ste 100
32073 (904)264-1206

Ake, OD, Edward F
195 Blanding Blvd Ste 3
32073 (904)288-1440

Allen, OD, Marquet A
28 Blanding Blvd
32073 (904)264-5483

Anquas, OD, Edwin N
28 Blanding Blvd
32073 (904)264-5483

Ayer, OD, Mary J
1515 Business Center Dr Ste 4
32003 (904)278-1760

Bouman, OD, Cristina B
784 Blanding Blvd Ste 100
32065 (904)272-3937

Bouman, OD, Cristina B
905 Park Ave Ste 100
32073 (904)264-1206

Brown, OD, Nicole Y
4605 US Highway 17 Ste 1
32033 (904)269-8161

Donovan, MD, John P
1615 County Road 220 Ste 140
32003 (904)276-2072

Donovan, MD, John P
2023 Pro Ctr Dr Ste A
32073 (904)272-2020

Dooner, MD, Donald M
1615 County Road 220 Ste 140
32003 (904)276-2072

**Duval**

Columbia

Bedoya, MD, Eduardo M
876 SW State Road 247
32025 (386)755-7595

Broome III, OD, Frank A
763 SW Main Blvd Ste 101
32025 (386)752-1722

Broome, OD, Kimberly M
763 SW Main Blvd Ste 101
32025 (386)752-1722

Cole, OD, Reaves C
621 SW Baya Dr Ste 101
32025 (386)754-6616

Foreman, OD, Ronald R
763 SW Main Blvd Ste 101
32025 (386)752-1722

Gaines, OD, Julie L
763 SW Main Blvd Ste 101
32025 (386)752-1722

Creek

Minefied, OD, James H
85 NE 351 Hwy
32638 (352)498-5007

**DIXIE**

Atlantic Beach

Duperault Jr, OD, Herman M
447 Atlantic Blvd Ste 1
32233 (904)247-0211

Grimselle, OD, Richard S
447 Atlantic Blvd Ste 1
32233 (904)247-0211

Pope, OD, Mark A
447 Atlantic Blvd Ste 1
32233 (904)247-0211

Jacksonville

Akel, OD, Edward F
5205 Normandy Blvd Ste 3
32205 (904)781-7717

Akel, OD, Gary M
959 Lane Ave S
32205 (904)786-4442

Bateh, OD, Norman S
1233 Lane Ave S Ste 15
32205 (904)781-6770

Bateh, OD, Norman S
5162 Norwood Ave
32208 (904)764-2591

Bowman, OD, Samuel L
806 Riverside Ave
32204 (904)356-7101

Brown, OD, Jeffrey D
2255 Dunn Ave Ste 101B
32218 (904)757-1495

Brown, OD, Larry G
2001 College St
32204 (904)355-5555

Brown, OD, Monica
1420 Flagler Ave
32207 (904)425-6060

Brown, OD, Monica
7501 Southpoint Pkwy Ste 300
32216 (904)398-2720

Caopon, OD, Bruce M
1840 Dunn Ave Ste 4
32218 (904)751-4483

Cavett, OD, Melanie J
8102 Blanding Blvd Ste 23
32244 (904)777-3937

**July, 2010**
Opening doors to better vision for thousands of people — with affordable LASIK & PRK procedures.*

Reduced fees

The LASIK and PRK procedures are available for plan members who are nearsighted or have astigmatism and wear glasses or contacts.** We have contracted with many of the finest facilities and eye doctors to offer these procedures at substantially reduced fees.

Members receive substantial reductions when procedures are done by network providers. Members can use Lasik provider network doctors at a cost of no more than $1,800 per eye for Conventional Lasik procedures and $2,300 per eye for custom Lasik. Or they can use designated TLC Vision Centers for the Lasik Advantage program that have the following fixed prices:

- Conventional Lasik - $895 per eye
- Custom Lasik - $1,295 per eye
- Custom Lasik with IntraLase - $1,895 per eye

Easy access to service

During your comprehensive eye health examination, your doctor can determine if you are a candidate for LASIK or PRK. If you qualify, the doctor can also make arrangements for the procedure with one of the centers that participates in this program. Plan members can also go directly to one of the participating providers.

Your VisionPass Form or your VCP ID Card verifies your eligibility for LASIK and PRK discounts. In either case, you may obtain a VisionPass Form and list of providers from our website (www.mycompbenefits.com) or by calling our Customer Care Department at 800-865-3676.*** To initiate services in the TLC Vision Advantage Program call 888-358-3937.

This discount cannot be combined with any other discount or promotional offer. The Humana/CompBenefits LASIK and PRK Program is not affiliated with any medical or health plan.

* Laser-assisted in-situ keratomileusis; photorefractive keratectomy.
** If qualified as a LASIK and PRK candidate by the network doctor.
*** Program availability and professional fees may vary based on location and regulatory approval.
# Benefits Enrollment Form

**Group Name:** Jacksonville University

## Please complete the following information:

<table>
<thead>
<tr>
<th>Social Security No.</th>
<th>Last Name</th>
<th>First</th>
<th>Middle</th>
<th>Date of Birth</th>
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<th>Home Address</th>
<th>Home Phone</th>
<th>Gender</th>
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<th>City</th>
<th>State</th>
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<th>Business Phone</th>
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## List All Your Eligible Dependents That Are To Be Covered

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<tr>
<th>First</th>
<th>MI</th>
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<th>Sex</th>
<th>Birth Date</th>
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## Effective Date: Plan Code: Group Number Your E-mail Address Agent Number

**PLEASE CHECK YOUR CHOICE**

- Vision Plan

## Monthly Rates

<table>
<thead>
<tr>
<th>Employee Only</th>
<th>$6.50</th>
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<tbody>
<tr>
<td>Employee + Family</td>
<td>$18.60</td>
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I wish to enroll in the plan indicated above as offered through my employer. I understand that this is a minimum one (1) year contract. I hereby authorize my employer to deduct all applicable contribution amounts from my salary or other compensation for the plan year, and for future renewal period(s). I understand that such contribution rate is subject to change on the anniversary date of the plan.

I hereby represent that all information furnished by me hereon is true and complete to the best of my knowledge.

Signature: X ________________________________ Date: __________________

---

I hereby authorize my employer to deduct all applicable contribution amounts from my salary or other compensation for the plan year, and for future renewal period(s). I understand that such contribution rate is subject to change on the anniversary date of the plan.

I hereby represent that all information furnished by me hereon is true and complete to the best of my knowledge.

Signature: X ________________________________ Date: __________________

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