

Policyholder: Butte Auto LLC



Group voluntary vision Benefit summary for all members

Effective date: 01/01/2026

What's available to me?

Vision insurance is offered through Principal® and VSP® Vision Care. It provides choice, flexibility and savings through a VSP doctor.

If you buy this coverage, an established network of VSP doctors will provide quality care for you and your dependents.

	Benefits		Frequencies
	VSP provider	Out-of-network provider	All providers
Exams	One exam is covered in full after \$10 copay	Up to \$45	Once every 12 months
Prescription glasses	Covered in full after \$25 copay		
Lenses Single lenses Lined bifocal lenses Lined trifocal lenses Lenticular lenses		Up to \$30 Up to \$50 Up to \$65 Up to \$100	Two lenses (one pair) every 12 months
Frames	Covered up to \$150	Up to \$70	One set every 12 months
Elective contacts	Covered up to \$150	Up to \$105	Once every 12 months Contact lenses can be chosen instead of glasses.
Contact fitting and evaluation	Up to \$60 copay	Not covered	Once every 12 months
Necessary contacts	Covered in full after \$25 copay	Up to \$210	Once every 12 months Contact lenses can be chosen instead of glasses.

Insurance issued by Principal Life Insurance Company, 711 High Street, Des Moines, IA 50392

Who can buy coverage?

- You may buy coverage if you're an active, full-time employee. Seasonal, temporary, or contract employees can't purchase.
 - If you're on regularly scheduled day off, holiday, vacation day, jury duty, funeral leave, or personal time off, you're still considered actively at work, as long as you're fulfilling your regular duties and were working the day immediately prior to your time off.
 - You must enroll within 31 days of being eligible. If you don't, you'll have to wait until the next open enrollment period.
- If you're covered, you may buy coverage for your dependents.

Additional eligibility requirements may apply.

What's the difference between elective and necessary contacts?

- Elective - when vision can be corrected by glasses, but contacts are worn.
- Necessary - when vision can't be corrected with glasses due to extreme vision problems.

Why am I charged an additional copay for contact fitting and evaluation?

- Contact lens wearers require an additional evaluation of the eyes' measurements, and possible follow-up appointments, for fitting and training on proper use of contact lenses.
- For these additional services, you won't pay more than \$60 at in-network providers.

Are benefits the same for all VSP doctors?

- Yes, with the exception of Costco®, Walmart®, and Sam's Club®. The frame allowance at these locations is \$80 which is equivalent to a \$150 allowance at other VSP doctor locations. Not all providers at participating retail chains are in-network for exam services.
- Benefits may also vary by location due to state law.

How do I find a VSP doctor?

- Visit vsp.com to locate VSP doctors close to you -- or to see if your current eye care professional is in the VSP network.
 - You'll need to choose the "Choice" doctor network to view the VSP doctors for your coverage.
- Call 800-877-7195.

Will I get an ID card?

- Yes, your card will have a unique member ID that your doctor will use to verify benefits.

Will my doctor submit my claim?

- If you're seeing a VSP doctor, they'll submit the claim for you.
- If you're seeing someone outside the VSP network, you're responsible for submitting your own claim. You can get that form from vsp.com after logging in as a member using your member ID. Or call 800-877-7195.

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Are there any additional savings with VSP?

- Glasses and sunglasses - you can save an average of 20-25% off glasses or sunglasses from any VSP doctor within 12 months of your last covered vision exam.
- Laser vision correction - you pay an average of 15% off the regular price and 5% off the promotional price. You'll only receive these discounts from contracted clinics. Go to VSP.com and register using your member ID to see the laser vision promotions and find a contracted clinic.

These savings can vary based on state laws and provider location.

What are the limitations of my benefits?

- Visual analysis or vision aids that aren't medically necessary aren't covered.
- No benefits will be paid for:
 - Non-prescription glasses
 - Medical or surgical treatment of the eyes
 - Claims submitted by a doctor who is part of your family

This benefit summary is a summary only. For a complete list of benefit information and limitations, please refer to your booklet.

How are premium rates determined?

Premiums are established based on group demographics including group size, employee ages, salaries, and occupations, along with the benefit design. Changes in these factors along with the group's claims experience will determine the renewal rate. Proof of good health is required if on the date the member becomes eligible for coverage there are fewer than five insured members. The estimated average monthly premium per employee is \$17. However, actual premiums may vary based on group demographics and benefit design.

Premium trend is not being applied at this time.



principal.com

This is a summary of vision coverage insured by or with administrative services provided by Principal Life Insurance Company. This outline is a brief description of your coverage. It is not an insurance contract or a complete statement of the rights, benefits, limitations and exclusions of the coverage. If there is a discrepancy between the policy and this document, the actual policy provision prevails. For complete coverage details, refer to the booklet.

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