

1. CHOOSE YOUR BENEFIT OPTION

Standard Option

Your Coverage

When visiting a VSP network doctor, you'll receive:

Exam covered in full.....every 12 months

Prescription Eyewear Discounts

Lenses

20% discount when a complete pair of glasses is purchased

Frames

20% discount when a complete pair of glasses is purchased

Contacts

15% discount off the contact lenses fitting and evaluation exam. This exam is in addition to your vision exam to ensure proper fit of contacts.

Advantages of Coverage

Without coverage, an exam and prescription glasses can cost \$300 dollars or more. With VSP coverage, you'll save by budgeting for your eyecare.

Extra Discounts and Savings

Laser Vision Correction Discounts

Prescription Glasses

20% off additional complete pairs of prescription glasses

Contacts

Exclusive pricing on annual supplies of popular brands

Dollar for dollar you get the best value from your VSP benefit when you visit a VSP network doctor. If you decide not to see a VSP doctor, the copays still apply. You'll also receive a lesser benefit and typically pay more out-of-pocket. You are required to pay the **provider in full at the time of your appointment and submit a claim to VSP for partial reimbursement.** If you decide to see a provider not in the VSP network, call us first at 800-877-7195.

Out-of-Network Reimbursement Amounts:

Exam.....Up to \$35

Lenses:

Single...Up to \$25 Bifocal...Up to \$40 Trifocal...Up to \$55

Frames.....Up to \$45

Contact Lenses...Up to \$105

Plus Option

Your Coverage

When visiting a VSP network doctor, you'll receive:

Exam covered in full.....every 12 months

Prescription Glasses – after \$25 deductible

Lenses covered in full.....every 12 months

Single vision, lined bifocal and lined trifocal lenses

Frames.....every 24 months

Frame of your choice covered up to \$120. Plus 20% off any out-of-pocket costs.

-OR-

Contacts – after \$25 deductible.....every 12 months

When you choose contacts instead of glasses, your \$105 allowance applies to the cost of your lenses and the fitting and evaluation exam. This exam is in addition to your vision exam to ensure proper fit of contacts. If you choose contact lenses, you will be eligible for a frame 12 months from the date the contact lenses were obtained.

Advantages of Coverage

Without coverage, an exam and prescription glasses can cost \$300 or more. With VSP coverage, you'll save by budgeting for your eyecare.

Extra Discounts and Savings

Laser Vision Correction Discounts

Prescription Glasses

- Up to 20% savings on lens extras such as scratch resistant and anti-reflective coatings and progressives
- 20% off additional prescription glasses and sunglasses

Contacts

- Exclusive pricing on annual supplies of popular brands
- 15% off cost of contact lens exam (fitting and evaluation)

2. CHOOSE YOUR COVERAGE PLAN

Standard Option	Monthly	Quarterly	Semi-annually	Annually
Student/Employee	N/A	\$8.95	\$16.95	\$32.95
Student/Employee+1	N/A	\$14.95	\$28.95	\$56.95
Family	N/A	\$19.95	\$39.95	\$79.95
Plus Option				
Student/Employee	\$12.95	\$37.95	\$74.95	\$148.95
Student/Employee+1	\$18.95	\$55.95	\$109.95	\$219.95
Family	\$33.95	\$99.95	\$198.95	\$396.95

- Monthly payment by bank draft only and is available only on Plus Option
- If you choose to pay monthly, three (3) monthly payments are required before you are eligible for services or benefits.
- **If you cancel coverage after receiving benefits, but before paying the equivalent to one (1) year's premium, you will not be allowed back on coverage until previous year's premium is paid in full, and then an annual premium must be paid in advance for new coverage.**