

# A LOOK AT YOUR VSP VISION COVERAGE



## SEE HEALTHY AND LIVE HAPPY WITH HELP FROM CARMEL-CLAY SCHOOLS AND VSP.

As a VSP® member, you get personalized care from a VSP network doctor at low out-of-pocket costs.

### VALUE AND SAVINGS YOU LOVE.

Save on eyewear and eye care when you see a VSP network doctor. Plus, take advantage of Exclusive Member Extras for additional savings.

### PROVIDER CHOICES YOU WANT.

It's easy to find a nearby in-network doctor. Maximize your coverage with bonus offers and savings that are exclusive to Premier Program locations—including thousands of private practice doctors and over 700 Visionworks retail locations nationwide.



### QUALITY VISION CARE YOU NEED.

You'll get great care from a VSP network doctor, including a WellVision Exam®—a comprehensive exam designed to detect eye and health conditions.

#### PROVIDER NETWORK:

VSP Signature

#### EFFECTIVE DATE:

01/01/2021

Log in to [vsp.com](https://vsp.com) to find an in-network provider based on your plan type.

Contact us:

**800.877.7195** or [vsp.com](https://vsp.com)

BENEFIT	DESCRIPTION	COPAY
<b>YOUR COVERAGE WITH A VSP PROVIDER</b>		
<b>WELLVISION EXAM</b>	<ul style="list-style-type: none"> <li>Focuses on your eyes and overall wellness</li> <li>Children - additional exam provided when needed</li> <li>Every 12 months</li> </ul>	\$10
<b>PRESCRIPTION GLASSES</b>		
<b>FRAME</b>	<ul style="list-style-type: none"> <li>\$150 allowance for a wide selection of frames</li> <li>\$170 allowance for featured frame brands</li> <li>20% savings on the amount over your allowance</li> <li>\$80 Walmart®/Sam's Club®/Costco® frame allowance</li> <li>Children - every 12 months</li> <li>Adults - every 24 months</li> </ul>	Included in Prescription Glasses
<b>LENSES</b>	<ul style="list-style-type: none"> <li>Single vision, lined bifocal, and lined trifocal lenses</li> <li>Children - additional lenses fully covered with Rx change</li> <li>Every 12 months</li> </ul>	Included in Prescription Glasses
<b>LENS ENHANCEMENTS</b>	<ul style="list-style-type: none"> <li>Impact-resistant lenses</li> <li>Standard progressive lenses</li> <li>Premium progressive lenses</li> <li>Custom progressive lenses</li> <li>Average savings of 40% on other lens enhancements</li> <li>Every 12 months</li> </ul>	\$0 \$0 \$80 - \$90 \$120 - \$160
<b>CONTACTS (INSTEAD OF GLASSES)</b>	<ul style="list-style-type: none"> <li>\$150 allowance for contacts; copay does not apply</li> <li>Contact lens exam (fitting and evaluation)</li> <li>Every 12 months</li> </ul>	Up to \$60
<b>PRIMARY EYECARE<sup>SM</sup></b>	<ul style="list-style-type: none"> <li>Retinal screening for members with diabetes</li> <li>Additional exams and services for members with diabetes, glaucoma, or age-related macular degeneration.</li> <li>Treatment and diagnoses of eye conditions, including pink eye, vision loss, and cataracts available for all members.</li> <li>Limitations and coordination with your medical coverage may apply. Ask your VSP doctor for details.</li> <li>As needed</li> </ul>	\$0 \$20 per exam
<b>EXTRA SAVINGS</b>	<p><b>Glasses and Sunglasses</b></p> <ul style="list-style-type: none"> <li>Extra \$20 to spend on featured frame brands. Go to <a href="https://vsp.com/offers">vsp.com/offers</a> for details.</li> <li>30% savings on additional glasses and sunglasses, including lens enhancements, from the same VSP provider on the same day as your WellVision Exam. Or get 20% from any VSP provider within 12 months of your last WellVision Exam.</li> </ul> <p><b>Routine Retinal Screening</b></p> <ul style="list-style-type: none"> <li>No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam</li> </ul>	

#### YOUR COVERAGE WITH OUT-OF-NETWORK PROVIDERS

Get the most out of your benefits and greater savings with a VSP network doctor. Call Member Services for out-of-network plan details.

VSP guarantees coverage from VSP network providers only. Coverage information is subject to change. In the event of a conflict between this information and your organization's contract with VSP, the terms of the contract will prevail. Based on applicable laws, benefits may vary by location. In the state of Washington, VSP Vision Care, Inc., is the legal name of the corporation through which VSP does business.

# KidsCare Plan



While your child's pediatrician or school nurse may do an annual vision screening, it's not the same as a thorough eye exam by a VSP<sup>®</sup> doctor.

The VSP KidsCare Plan is designed to meet the eye care and eyewear needs of active and growing children by providing two WellVision Exams<sup>®</sup> and one pair of glasses every year.



## Help keep their eyes healthy.

- Vision problems left untreated can seriously impact learning, behavior, and overall development.
- Vision can change significantly during rapid physical development—even in as short a period as one year.
- Kids are prone to losing, damaging, and breaking their glasses, making additional pairs sometimes necessary. With this plan, kids are eligible for new glasses every year.

### Your KidsCare Coverage with a VSP Doctor\*

Eye Exam	<ul style="list-style-type: none"><li>• Two, fully covered<sup>1</sup> comprehensive eye exams that test for eye health and vision problems that can begin during childhood, like nearsightedness, amblyopia (lazy eye), and strabismus (cross-eye)</li></ul>
Eyewear	<ul style="list-style-type: none"><li>• Frames and lenses fully covered<sup>1</sup> up to your current retail allowance, including child-friendly, impact-resistant polycarbonate lenses</li><li>• Additional lenses fully covered when needed<sup>2</sup></li><li>• Up to 20% savings on amount above the retail allowance</li><li>• Savings on additional pairs of prescription glasses</li></ul>

\*Register and log on to [vsp.com](http://vsp.com) to review your benefit information. Based on applicable laws; benefits may vary by location.

# 1 IN 4 CHILDREN

have a vision problem  
that can affect learning.<sup>3</sup>

Questions? [vsp.com](http://vsp.com) | 800.877.7195.

1. Less any applicable copay 2. Minimum prescription change required 3. Vision Council, A Summary of Medical Literature on Vision Screenings and Eye Exams, 2004

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