

VSP-2

YOUR COST AND REIMBURSEMENT SCHEDULE

	<u>PANEL PROVIDER</u>	<u>NON-PANEL PROVIDER</u>
Professional Fees		
Vision Examination		
Optometrist	You pay only \$6.50 deductible	Limited to \$28.50 - you pay balance
Ophthalmologist	You pay only \$6.50 deductible	Limited to \$38.50 - you pay balance
Spectacle Lenses (Pair)		
Single Vision		Limited to \$29 - you pay balance
Bifocal	You pay only \$18 deductible on lenses <u>and</u> frames	Limited to \$51 - you pay balance
Trifocal		Limited to \$63 - you pay balance
Lenticular		Limited to \$75 - you pay balance
Frames		Covered up to \$65 retail
Contact Lenses (Pair, Including Exam)		
Necessary	Covered in full	Limited to \$175 - you pay balance
Cosmetic	Covered up to \$90 and additional 20% off balance	Limited to \$90 - you pay balance
<u>Lenses With Extras</u>		
Photochromics Sun or Gradient Tints Tinted/Color-Coated		
Single Vision	Covered in full	Limited to \$33 - you pay balance
Bifocal	Covered in full	Limited to \$61 - you pay balance
Trifocal	Covered in full	Limited to \$75 - you pay balance
Lenticular	Covered in full	Limited to \$89 - you pay balance
Polaroid		
Single Vision	Covered in full	Limited to \$47 - you pay balance
Bifocal	Covered in full	Limited to \$81 - you pay balance
Trifocal	Covered in full	Limited to \$101 - you pay balance
Lenticular	Covered in full	Limited to \$119 - you pay balance
Oversize	Covered in full	Included in lens allowance shown above - you pay balance
Rimless	Covered in full	Included in lens allowance shown above - you pay balance

Vision Care Schedule

Plan Year

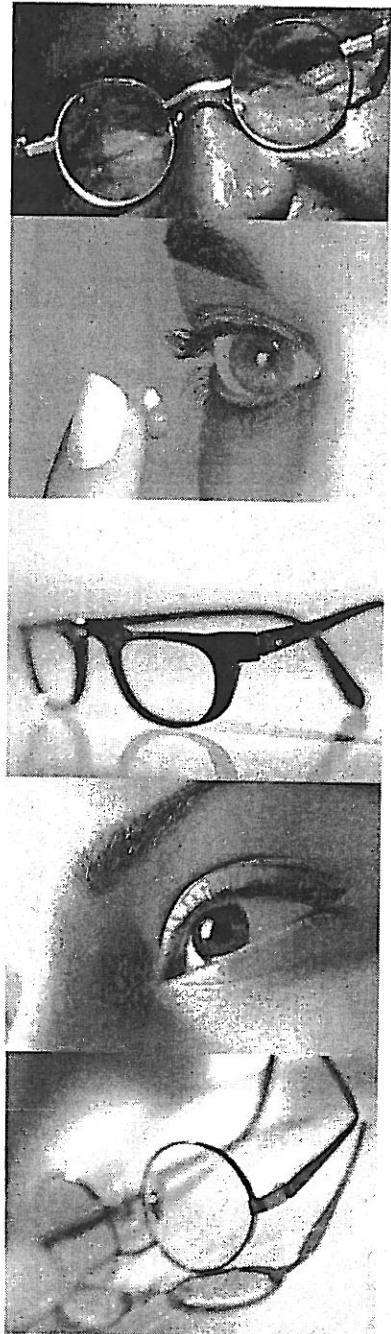
Your plan year begins on the first day of *July* and ends on the last day of *June*.

Employees Eligible for Insurance

Plan eligibility is determined by your employer and is recorded in the records maintained in connection with the Group Policy.

Date of Eligibility

You will be eligible on the plan effective date, the date of your employment, or the day following completion of the eligibility waiting period as determined by your employer, whichever is later.



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