

Your VSP Vision Benefits Summary

VSP Individual Plan: 130 with Dental
VSP Doctor Network: VSP Choice

Visit vsp.com for personalized coverage details and exclusive savings for VSP members.

Benefit	Description	Copay	Frequency
Your Coverage with a VSP Doctor			
WellVision Exam	<ul style="list-style-type: none"> Focuses on your eyes and overall wellness 	\$10	Every 12 months
Prescription Glasses		\$20	See Frame and Lenses
Frame	<ul style="list-style-type: none"> \$130 allowance for a wide selection of frames OR \$150 allowance for featured frame brands 20% savings on the amount over your allowance 	Included with Prescription Glasses	Every 24 months
Lenses	<ul style="list-style-type: none"> Single vision, lined bifocal, and lined trifocal lenses Impact-resistant (polycarbonate) lenses for children 	Included with Prescription Glasses	Every 12 months
Lens Enhancements	<ul style="list-style-type: none"> Progressive lenses (no-line bi/trifocals, ranging from standard to custom) Light-to-dark lens tinting (photochromic adaptive lenses) Average 20-25% savings on other lens enhancements 	\$55 - \$175 \$70 - \$82	Every 12 months
Contacts (instead of glasses)	<ul style="list-style-type: none"> \$130 allowance for contacts and contact lens exam (fitting and evaluation) 15% savings on a contact lens exam 	\$0	Every 12 months
Extra Savings	Glasses and Sunglasses <ul style="list-style-type: none"> Extra \$20 to spend on a featured frame brand, which is on top of your frame allowance. Simply choose a featured frame brand from your VSP doctor and the extra \$20 will be automatically applied to your purchase. 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP doctor within 12 months of your last WellVision Exam. 		
	Laser Vision Correction <ul style="list-style-type: none"> Average 15% savings on the regular price or 5% savings on the promotional price from contracted facilities. 		
	TruHearing Program <ul style="list-style-type: none"> Up to \$2,400 savings on hearing aids for you and your family. Visit vsp.truhearing.com or call 877.396.7194. (Not available in the state of WA) 		
	Exclusive Member Extras <ul style="list-style-type: none"> Visit vsp.com to view over \$2,500 in savings available only to VSP members. 		

Renewing your Plan

Your plan will automatically renew at the end of your policy period and your payment information you provided us will be automatically charged for the appropriate amount. We'll remind you 60 days in advance of your renewal—in case you wish to make any changes to your plan prior to your renewal date. For questions about your VSP coverage, visit vsp.com or call us at **877.759.5758**.

Member Satisfaction

You have 30 days after your effective date to examine your plan risk-free. If within 30 days you're dissatisfied with the plan you may return it and obtain a refund of any premium paid. If you return this policy, you will be responsible for payment in full of any services received or materials purchased from the policy effective date to the date the policy is returned. If you selected the monthly payment option for your annual benefit term, you've agreed to pay the required annual premium in twelve (12) payments. To provide new payment information or request cancellation, please call us at **877.759.5758**.

*Coverage terms and conditions are set forth in the policy under which the individual consumer is insured, and such terms and conditions vary according to the laws of the state in which the policy was issued.

Based on applicable laws, benefits may vary by location.

Your Monthly Contribution:

Member: \$10.69 Member Plus One: \$20.39 Family: \$32.23

We guarantee your satisfaction. If you're not 100% happy with the eyecare and eyewear you receive from a VSP doctor, we'll make it right.

Contact us. vsp.com | **877.759.5758**

Consumers' #1 Choice in Vision Care – Ipsos National Vision Plan Member Research, 2012.

1. Brands/promotion subject to change.

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