

As a member, you'll get access to savings and personalized vision care from a VSP network doctor for you and your family.

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 which provide offers from VSP and leading industry brands totaling over \$3,000 in savings.

Provider choices you want.



With thousands of choices, getting the most out of your benefits is easy at a VSP Premier Edge™ location.

Shop online and connect your benefits.



Eyeconic® is the preferred VSP online retailer where eyeconic you can shop in-network with your vision benefits. See your savings in real time when you shop over 70 brands of contacts, eyeglasses, and sunglasses.

Quality vision care you need.

You'll get great care from a VSP network doctor, including a WellVision Exam®. An annual eye exam not only helps you see well, but helps a doctor detect signs of eye conditions and health conditions, like diabetes and high blood pressure.

Using your benefit is easy!

Create an account on **vsp.com** to view your in-network coverage, find the VSP network doctor who's right for you, and discover savings with exclusive member extras. At your appointment, just tell them you have VSP.

YSD... vision care

More Ways to Save

Extra

\$20

to spend on Featured Brands[†]

bebe

Calvin Klein

COLE HAAN

@DRAGON. LONGCHAMP

FLEXON



See all brands and offers at vsp.com/offers.



Up to

40%

Savings on lens enhancements‡

Your VSP Vision Benefits Summary

RENEELT

ACWA JPIA and VSP provide you with an affordable vision plan.

DESCRIPTION

PROVIDER NETWORK:

CODAY

VSP Signature



01/01/2024



EDECLIENCY

DESCRIPTION	COPAY	FREQUENCY
Your Coverage with a VSP Provider		
Focuses on your eyes and overall wellness	\$5 for exam and glasses	Every 12 months
 Retinal screening for members with diabetes Additional exams and services beyond routine care to treat immediate issues from pink eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more. Coordination with your medical coverage may apply. Ask your VSP doctor for details. 	\$0 per screening \$20 per exam	Available as needed
:s		
 \$170 featured frame brands allowance \$150 frame allowance 20% savings on the amount over your allowance \$80 Walmart*/Sam's Club*/Costco* frame allowance 	Combined with exam	Every 24 months
Single vision, lined bifocal, and lined trifocal lensesImpact-resistant lenses for dependent children	Combined with exam	Every 12 months
 Standard progressive lenses Premium progressive lenses Custom progressive lenses Anti-glare coating Average savings of 40% on other lens enhancements 	\$0 \$25 \$25 \$25	Every 12 months
 \$150 allowance for contacts and contact lens exam (fitting and evaluation) 15% savings on a contact lens exam (fitting and evaluation) 	\$0	Every 12 months
• 30% savings on additional glasses and sunglasses, including lens	enhancements, fro	
Routine Retinal ScreeningNo more than a \$39 copay on routine retinal screening as an enhance	nancement to a We	IIVision Exam
 Laser Vision Correction Average 15% off the regular price or 5% off the promotional price facilities 	e; discounts only av	vailable from contracted
	Focuses on your eyes and overall wellness Retinal screening for members with diabetes Additional exams and services beyond routine care to treat immediate issues from pink eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more. Coordination with your medical coverage may apply. Ask your VSP doctor for details. \$170 featured frame brands allowance \$150 frame allowance 20% savings on the amount over your allowance \$80 Walmart*/Sam's Club*/Costco* frame allowance \$ingle vision, lined bifocal, and lined trifocal lenses Impact-resistant lenses for dependent children Standard progressive lenses Premium progressive lenses Premium progressive lenses Anti-glare coating Average savings of 40% on other lens enhancements \$150 allowance for contacts and contact lens exam (fitting and evaluation) Glasses and Sunglasses Extra \$20 to spend on featured frame brands. Go to vsp.com/of 30% savings on additional glasses and sunglasses, including lens on the same day as your WellVision Exam. Or get 20% from any WellVision Exam. Routine Retinal Screening No more than a \$39 copay on routine retinal screening as an enf	Your Coverage with a VSP Provider Focuses on your eyes and overall wellness Retinal screening for members with diabetes Additional exams and services beyond routine care to treat immediate issues from pink eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more. Coordination with your medical coverage may apply. Ask your VSP doctor for details. **STO featured frame brands allowance **\$150 frame allowance **\$20 per exam **Combined with your weld allowance **\$150 frame allowance **\$25 combined with exam **Standard progressive lenses for dependent children **Standard progressive lenses **Premium progressive lenses **Premium progressive lenses **Premium progressive lenses **Anti-glare coating **Average savings of 40% on other lens enhancements **\$150 allowance for contacts and contact lens exam (fitting and evaluation) **\$150 allowance for contacts and contact lens exam (fitting and evaluation) **\$150 allowance for contacts and contact lens exam (fitting and evaluation) **\$150 allowance for contacts and contact lens exam (fitting and evaluation) **Glasses and Sunglasses **Extra \$20 to spend on featured frame brands. Go to vsp.com/offers for details. **30% savings on additional glasses and sunglasses, including lens enhancements, fro on the same day as your WellVision Exam. Or get 20% from any VSP provider within WellVision Exam. **Routine Retinal Screening **No more than a \$39 copay on routine retinal screening as an enhancement to a Wellvision Exam.

[†]Only available to VSP members with applicable plan benefits. Frame brands and promotions are subject to change.

‡Savings based on doctor's retail price and vary by plan and purchase selection; average savings determined after benefits are applied. Ask your VSP network doctor for more details. +Coverage with a retail chain may be different or not apply.

Examup to \$50

Frameup to \$70

Single Vision Lensesup to \$50

online in-network choices. Log in to vsp.com to find an in-network provider. Your plan provides the following out-of-network reimbursements:

Lined Bifocal Lensesup to \$75

Lined Trifocal Lensesup to \$100

To learn about your privacy rights and how your protected health information may be used, see the VSP Notice of Privacy Practices on vsp.com.

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Progressive Lensesup to \$75

Contactsup to \$120

VSP guarantees member satisfaction from VSP 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. TruHearing is not available directly from VSP in the states of California and Washington.