



Get the best in eye care and eyewear with VSP.

You've made the right decision to enroll in an Individual Vision Plan. As a member, you'll receive access to care from great eye doctors, quality eyewear, and the affordability you deserve, all at the lowest out-of-pocket costs.

Using your VSP benefit is easy.

1. Create an account on vsp.com.

Once your plan is effective, login using your social security number to:

- See coverage details, print your member reference card, and your previous VSP network doctor visits. Manage your account and update payment information safely and securely.
- · Get insights into your plan savings and tips to maximize your benefits.

2. Find a VSP network doctor who's right for you.

- Keep your doctor, or choose from our network of 33,000 providers.
- To find a VSP network doctor, visit vsp.com or call 877.759.5758.
- Choose a Premier Program location to get the most of your eye care experience.
- 3. Get a comprehensive eye exam and the perfect eyewear.
- At your appointment, tell them you have VSP. There is no ID card necessary.

That's it! We'll handle the rest—there are no claim forms to complete when you see a VSP network doctor.

Extra Savings.

Get an extra \$20 to spend when you choose a featured frame brand like bebe®, Calvin Klein, Cole Haan, Flexon®, Lacoste, Nike, Nine West, and more!¹ Visit **vsp.com** to find a VSP network doctor who carries these brands and to see all of your savings and Exclusive Member Extras.

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

Contact us. 877.759.5758 | vsp.com

Your VSP Vision Benefits Summary

VSP Individual Plan: Voluntary 130 VSP Individual Plan: VSP Choice

Benefit	Description	Сорау	Frequency
	Your Coverage with a VSP Network Do	octor ²	
WellVision Exam®	Focuses on your eyes and overall wellness	\$15	Every 12 months
Prescription Glasses		\$25	See Frame and Lenses
Frame	 \$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	 Single vision, lined bifocal, and lined trifocal lenses Impact-resistant (polycarbonate) lenses for children 	Included with Prescription Glasses	Every 12 Months
Lens Enhancements	 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)	 \$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 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 networl doctor within 12 months of your last WellVision Exam. 		
	 Retinal Screening No more than a \$39 copay on routine retinal screenings as an enhancement to your WellVision Exam. 		
	 Laser Vision Correction Average 15% savings on the regular price or 5% savings on the promotional price from contracted facilities. 		
	 TruHearing[®] Program 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) 		
	 Contact Lens Rebate 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**.

Automatic Payment

VSP will automatically charge the form of payment you provided, beginning 1-2 weeks before your plan's effective date. If you selected the monthly payment option for your annual contract term, you're obligated to pay the required annual premium in twelve (12) monthly installments. To update your payment information, visit vsp.com

Your Coverage with an Out-of-Network Doctor

If you choose to see a provider other than a VSP network doctor, login to **vsp.com** for your out-of-network coverage details and reimbursement schedule. Submit your itemized claim to VSP, PO. Box 997105, Sacramento, CA 95899-7105.

Based on applicable laws, benefits may vary by location.

We guarantee your satisfaction. If you're not 100% happy with the eye care and eyewear you receive from a VSP network doctor, we'll make it right. **877.759.5758 | vsp.com**

Consumers' #1 Choice in Vision Care - Blueocean Market Intelligence National Vision Plan Member Research, 2014.

1. Brands/Promotion subject to change. 2. 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.

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