

# Your VSP Vision Benefits Summary

Welcome to VSP® Vision Care. Your VSP vision benefit offers you the best in eyecare and eyewear.

**Personalized Care.** A VSP doctor provides personalized care that focuses on keeping you and your eyes healthy year after year. Plus, when you see a VSP doctor, you'll get the most out of your benefit, have lower out-of-pocket costs, and your satisfaction is guaranteed.

**Eyewear.** Choose the eyewear that's right for you and your budget. From classic styles to the latest designer frames, you'll find the eyewear that's right for you and your family.

**Choice of Providers.** With open access to see any eyecare provider, you can see the one who's right for you. Choose a VSP doctor or any other provider.

## Using your VSP benefit is easy.

- Find the right eyecare provider for you. To find a VSP doctor, visit vsp.com or call 800.877.7195.
- Review your benefit information. Visit vsp.com to review your plan coverage before your appointment.
- At your appointment, tell them you have VSP. There's no ID card required.

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

For your complete benefit description, visit **vsp.com** or call **800.877.7195**.

PLEASANTVILLE PUBLIC SCHOOLS and VSP provide you an affordable eyecare plan.

Doctor Network......VSP Choice

### Your Coverage with a VSP Doctor

**WellVision Exam**<sup>®</sup> focuses on your eye health and overall wellness

• \$10.00 copay..... every plan year<sup>1</sup>

#### **Prescription Glasses**

• \$20.00 copay

## Lenses..... every other plan year<sup>1</sup>

- Single vision, lined bifocal and lined trifocal lenses.
- Polycarbonate lenses for dependent children.

## Frame..... every other plan year<sup>1</sup>

- \$130 allowance for a wide selection of frames.
- 20% off amount over your allowance

~OR~

#### **Contact Lens Care**

No copay applies.....every other plan year<sup>1</sup>

\$130.00 allowance for contacts and the contact lens exam (fitting and evaluation).

Current soft contact lens wearers may qualify for a special program that includes a contact lens exam and initial supply of replacement lenses.

#### **Extra Discounts and Savings**

#### **Glasses and Sunglasses**

Average 20 – 25% savings on all non-covered lens options
20% off additional glasses and sunglasses, including lens options, from any VSP doctor within 12 months of your last WellVision Exam

#### Contacts

•15% off cost of contact lens exam (fitting and evaluation)

#### **Laser Vision Correction**

•Average 15% off the regular price or 5% off the promotional price. Discounts only available from contracted facilities.

## Your Coverage with Other Providers

Visit vsp.com for details, if you plan to see a provider other than a VSP doctor.

Exam	Up to \$ 43.00
Single Vision Lenses	Up to \$ 30.00
Lined Bifocal Lenses	Up to \$ 45.00
Lined Trifocal Lenses	Up to \$ 62.00
Frame	Up to \$ 40.00
Contacts	Up to \$ 100.00

VSP guarantees service from VSP doctors only. In the event of a conflict between this information and your organization's contract with VSP, the terms of the contract will prevail.



<sup>&</sup>lt;sup>1</sup> Plan year begins in August