



At VSP®, we invest in the things you value most—the best care at the lowest out-of-pocket costs with the widest selection of glasses. Because we're the only national not-for-profit vision care company, you can trust that we'll always put your wellness first.

You'll like what you see with VSP.



Best value.

You'll enjoy low out-of-pocket costs, saving you hundreds of dollars on your eye exam and glasses.



Best care.

Your VSP network doctor will help keep you and your eyes healthy with a WellVision Exam®—a comprehensive eye exam that aids in early detection of health conditions.



Best choices.

When you see a VSP network doctor, you'll get the most out of your benefit. Choose from the nation's largest network of independent doctors who carry a wide selection of name-brand frames for your style and budget.



Create an account at vsp.com. Once your annual plan is effective, review your benefit information.

Find a VSP network doctor who's right for you. To find a doctor, visit **vsp.com**. Choose a Premier Program location to get the most out of your eye care benefits.

At your appointment, tell them you have VSP. There's no ID card necessary.

That's it! We'll handle the rest—there are no claim forms to complete.



Enjoy Exclusive Member Extras from VSP and industry leading brands—totaling more than \$2,500 in savings—that you can't find anywhere else.

- TruHearing®—Up to 60% savings on digital hearing aids and receive discounts on batteries.²
- · Savings on lenses, contacts, LASIK, and more.
- · Visit vsp.com/offers to view all offers.



Your VSP Vision Benefits Summary



VSP Individual Plan: Standard 175

Benefit	Description	Copay	Frequency	
	Your Coverage with a VSP Doctor ³			
WellVision Exam®	Focuses on your eyes and overall wellness	\$15	Every 12 months	
Prescription Glasses		\$25	See Frame and Lenses	
Frame	 \$175 allowance for a wide selection of frames OR \$195 allowance on a featured frame brand 20% savings on the amount over your allowance 	Included with Prescription Glasses	Every 12 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 (standard, premium or custom) Anti-glare Light-to-dark tinting (photochromic adaptive lenses) Scratch-resistant coating Impact-resistant (polycarbonate) lenses UV protection Average 20-25% savings on other lens enhancements	\$0 - \$175 \$41 - \$85 \$0 \$0 \$0 \$0	Every 12 months	
Contacts (instead of glasses)	\$175 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 network 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 network doctor within 12 months of your last WellVision Exam.			
Latia Savings	Retinal Screening No more than a \$39 copay on routine retinal screenings as an enhancement to your WellVision Exam.			
	Laser Vision Correction Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities.			

Your Coverage with Out-of-Network Providers

Get the most out of your benefits and greater savings with a VSP network doctor. If you visit an out-of-network provider, you will have higher out-of-pocket expenses.

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Examup to \$45	Lined Bifocal Lensesup to \$50	Progressive Lensesup to \$50
Frameup to \$70	Lined Trifocal Lensesup to \$65	Contactsup to \$105
Single Vision Lenseup to \$30		·

Note: If you choose to see an out-of-network provider, you'll receive less coverage. Payment is expected at the time of your visit. Following your appointment, you'll need to complete a claim form and include any itemized receipts. You can complete and submit the form on vsp.com or call 800.877.7195 to request a hard copy form. Address to Vision Service Plan, Attention: Claim Services, PO. Box 385018, Birmingham, AL 35238-5018. Out-of-network coverage is not available in the states of Massachusetts and Washington, and coverage varies in the state of Maryland.

Based on applicable laws, benefits may vary by location.

^{1, 2017} National Vision Plan Member Research

^{2.} VSP is providing information to its members, but does not offer or provide any discount hearing program. The relationship between VSP and TruHearing is that of independent contractors. VSP makes no endorsement, representations or warranties regarding any products or services offered by TruHearing, a third-party vendor. The vendor is solely responsible for the products or services offered by them. If you have any questions regarding the services offered here, you should contact the vendor directly. TruHearing offers individuals the opportunity to purchase hearing aids at discounted prices, including individuals covered by self-funded health plans not subject to state insurance or health plan regulations. TruHearing is not insurance and not subject to state insurance regulations. TruHearing provides discounts to certain health care groups for hearing aid sales and services; TruHearing provides fitting, programming and three adjustment visits at no cost; the member is obligated to pay for testing, and all post-fitting hearing care services, but will receive a discount from those health care providers who have contracted with TruHearing. Not available directly from VSP in the states of Washington and California.

^{3.} 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.

4. Brands/Promotions subject to change.

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