

Below is a sample of VSP plans and benefits available through a VSP Preferred Provider. These plans are recommended for clients with less than 500 employees. Contact your VSP representative for a customizable eye health and wellness solution.

	VSP Signature Plan <sup>®</sup> Premier Coverage	VSP Choice Plan <sup>®</sup> Full Coverage	<b>VSP Exam Plus<sup>sM</sup> Plan</b> Basic Exam Coverage
Preferred Provider Network	VSP	Choice	VSP
Employer-paid Plan Option	Minimum of two enrolled employees	Minimum of 10 enrolled employees	Minimum of 10 enrolled employees
Voluntary Plan Option	Minimum of 10 enrolled employees	Minimum of 10 enrolled employees	
Choice of Copays	✓	✓	✓
WellVision Exam <sup>®</sup>	Covered in full	Covered in full	Covered in full
Lens/Frame Frequency Options	✓	✓	
Basic Lenses	Covered in full	Covered in full	20% off
Discounts on Noncovered Lenses and Lens Options	Lens options are covered in full with a copay, saving an average of 35%–40%.	The most common lens options are covered in full with a copay, saving an average of 20%–25%.	20% off
Frames	\$130 retail allowance <sup>1</sup> ; 20% off amount over the allowance	\$130 retail allowance <sup>1</sup> ; 20% off amount over the allowance	20% off
Discounts on Additional Pairs of Glasses	30% off <sup>2</sup>	20% off	20% off
Contact Lens Exam (fitting and evaluation)	Standard <u>and</u> premium fit: covered in full after copay (15% off contact lens exam services; copay will never exceed \$60 <sup>1</sup> )	Standard <u>and</u> premium fit: covered in full after copay (15% off contact lens exam services; copay will never exceed \$60 <sup>1</sup> )	15% off of the contact lens exam and all other contact lens services
Prescription Contact Lenses (in lieu of glasses)	Materials covered in full up to \$130 Exclusive mail-in rebate savings <sup>3</sup> on eligible Bausch + Lomb <sup>®</sup> and ACUVUE <sup>®</sup> contact lenses	Materials covered in full up to \$130 Exclusive mail-in rebate savings <sup>3</sup> on eligible Bausch + Lomb and ACUVUE contact lenses	Exclusive mail-in rebate savings <sup>3</sup> or eligible Bausch + Lomb and ACUVUE contact lenses
Cost-controlled Pricing on Retinal Screenings Retinal screenings can enhance the exam experience	~		
VSP Primary EyeCare Plan <sup>SM</sup> Supplemental coverage for medical eye conditions, such as pink eye, by a VSP doctor; no referral necessary	~	~	✓
Eye Health Management Program <sup>®</sup> Member materials, care from VSP doctors, and data that support your wellness initiatives	~	~	✓
VSP Laser VisionCare <sup>™</sup> Program Discounts on LASIK, Custom LASIK <sup>4</sup> , and PRK, plus patient education	Average 15% off or 5% off promotional offer	Average 15% off or 5% off promotional offer	Average 15% off or 5% off promotional offer
Low Vision For people with extremely limited vision, not fully correctable by glasses or contacts	Exam and allowance for low vision aids every two years	Exam and allowance for low vision aids every two years	· · ·
<sup>1</sup> Standard covorage options are displayed above. M			I

<sup>1</sup> Standard coverage options are displayed above. Most items can be customized to meet your specific needs.

<sup>2</sup> 30% discount applies to glasses purchased the same day as the member's eye exam from the same VSP Preferred Provider who provided the exam. Members will also receive 20% off unlimited additional pairs of glasses, valid through VSP Preferred Providers, within 12 months of the last covered eye exam.

<sup>3</sup>Rebates subject to change.

<sup>4</sup> Applies when using wavefront technology with the microkeratome surgical device only. Other LASIK procedures may be performed at an additional cost to the member. VSP Laser VisionCare discounts are only available from VSP-contracted facilities.



Enhance your plan even further by adding one of these supplemental benefits.

Plan Enhancements	VSP Signature Plan Premier Coverage	<b>VSP Choice Plan</b> Full Coverage	<b>VSP Exam Plus Plan</b> Basic Exam Coverage
Covered Contacts Covers contact lens services and an annual supply of contacts in addition to glasses	~		
Second Pair Covers a second pair of glasses or an allowance for contact lenses	~		
Vision Therapy Coverage for patients with specific visual dysfunctions, such as turned eye or lazy eye	~		
Specialty Care Plans			
ProTec Safety <sup>®</sup> Plan Provides protective eyewear that meets ANSI and OSHA standards. Includes prescription lenses, and a selection of covered-in-full safety frames from ProTec Eyewear <sup>®</sup>	*		
Computer VisionCare <sup>SM</sup> Plan Helps detect eye health and vision issues attributed to regular computer use; includes exam, prescription glasses, and patient education	~		

## 2-9 Employee Program

VSP now has a program for clients with two to nine employees. Completely administered online, this premier full-service plan offers clients choice, flexibility, and maximum value through a VSP network doctor.

## **Exam Core Voluntary Materials Plan**

The exam is covered in full by the employer with a voluntary employee-paid materials buy-up option.