

A Look at Your VSP Vision Coverage

With VSP and AON Active Health Exchange,
your health comes first.



Enroll in VSP® Vision Care to 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 at over \$3,000 in savings.

Provider choices you want.

With private practice doctors and Visionworks® retail locations to choose from nationwide, getting the most out of your benefits is easy at a VSP Premier Edge™ location.



Shop online and connect your benefits.

eyeconic
a vsp vision company

You can shop in-network with your vision benefits at Eyeconic®. 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.

vsp
vision care

More Ways
to Save

**Extra
\$20
to spend on
Featured Frame Brands†**

bebe Calvin Klein
COLE HAAN DRAGON
FLEXON LONGCHAMP
and more

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

**+
Up to
40%
Savings on
lens enhancements‡**

Enroll through your employer today.
Contact us: **877.478.7559** or **aon.vspexchange.com**

†Only available to VSP members with applicable plan benefits. Frame brands and promotions are subject to change. Only available to VSP members on the Silver and Gold plans.

‡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.

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. Premier Edge is not available to some members in the state of Texas. Log in to **vsp.com** to check your benefits.

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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All other brands or marks are the property of their respective owners.

Classification: Restricted

Your VSP Vision Benefits Summary

AON Active Health Exchange and VSP provide you with a choice of affordable vision plans.

Provider Network:

VSP Choice

Effective Date:

Beginning on or
after 01/01/2024



BENEFIT	DESCRIPTION	COPAY	FREQUENCY
BRONZE PLAN COVERAGE WITH A VSP PROVIDER			
WELLVISION EXAM	<ul style="list-style-type: none"> Focuses on your eyes and overall wellness 	\$0	Every calendar year*
CONTACTS	<ul style="list-style-type: none"> 15% savings on a contact lens exam (fitting and evaluation) 	\$0	Every calendar year*
SILVER PLAN COVERAGE WITH A VSP PROVIDER			
WELLVISION EXAM	<ul style="list-style-type: none"> Focuses on your eyes and overall wellness 	\$20	Every calendar year*
PRESCRIPTION GLASSES		\$20	See frame and lenses
FRAME*	<ul style="list-style-type: none"> \$130 frame allowance 20% savings on the amount over your allowance \$70 Walmart/Sam's Club/Costco frame allowance 	Included in Prescription Glasses	Every calendar year*
LENSES	<ul style="list-style-type: none"> Single vision, lined bifocal, and lined trifocal lenses Impact-resistant lenses for dependent children Standard progressive lenses 	Included in Prescription Glasses	Every calendar year*
LENS ENHANCEMENTS	<ul style="list-style-type: none"> Premium progressive lenses Custom progressive lenses Average savings of 30% on other lens enhancements 	\$95 – \$105 \$150 – \$175	Every calendar year*
CONTACTS (INSTEAD OF GLASSES)	<ul style="list-style-type: none"> \$130 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation) 	Up to \$20	Every calendar year*
GOLD PLAN COVERAGE WITH A VSP PROVIDER			
WELLVISION EXAM	<ul style="list-style-type: none"> Focuses on your eyes and overall wellness 	\$10	Every calendar year*
PRESCRIPTION GLASSES		\$10	See frame and lenses
FRAME*	<ul style="list-style-type: none"> \$200 frame allowance 20% savings on the amount over your allowance \$110 Walmart/Sam's Club/Costco frame allowance 	Included in Prescription Glasses	Every calendar year*
LENSES	<ul style="list-style-type: none"> Single vision, lined bifocal, and lined trifocal lenses Impact-resistant lenses for dependent children Standard progressive lenses 	Included in Prescription Glasses	Every calendar year*
LENS ENHANCEMENTS	<ul style="list-style-type: none"> Impact-resistant lenses Premium progressive lenses Custom progressive lenses Average savings of 30% on other lens enhancements 	\$10 \$95 – \$105 \$150 – \$175	Every calendar year*
CONTACTS (INSTEAD OF GLASSES)	<ul style="list-style-type: none"> \$200 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation) 	Up to \$10	Every calendar year*
ALL PLAN OPTIONS			
ESSENTIAL MEDICAL EYE CARE	<ul style="list-style-type: none"> Retinal imaging for members with diabetes covered-in-full 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 network doctor for details. 	\$20 per exam	Available as needed
RETINAL SCREENING	<ul style="list-style-type: none"> Images of the inside of the eye, used to screen for potential signs of eye disease 	Up to \$39	Every calendar year*
ADDITIONAL SAVINGS	Glasses and Sunglasses <ul style="list-style-type: none"> Discover all current eyewear offers and savings at vsp.com/offers. 20% savings on unlimited additional pairs of prescription or non-prescription glasses/sunglasses, including lens enhancements, from a VSP provider within 12 months of your last WellVision Exam. 		
	Laser Vision Correction <ul style="list-style-type: none"> Average of 15% off the regular price; discounts available at contracted facilities. 		
	Exclusive Member Extras for VSP Members <ul style="list-style-type: none"> Contact lens rebates, lens satisfaction guarantees, and more offers at vsp.com/offers. Save up to 60% on digital hearing aids with TruHearing. Visit vsp.com/offers/special-offers/hearing-aids for details. Everyday savings on health, wellness, and more with VSP Simple Values. 		

*For plan years effective on or after 01/01/2024. Check your employer's Summary Plan Description for details.