

Vision Service Plan (VSP) Vision Coverage Summary

Service	Benefit Frequency	Patient Using a VSP Provider Pays	Patient Using an Out-of-Network Provider Pays
Eye examinations	Once in a calendar year	\$10 copayment	\$10 copayment plus any cost in excess of a provider reimbursement of up to \$40
Prescription Lenses including <i>Single Vision Lenses, Bifocal Lenses, Trifocal Lenses, and Lenticular Lenses</i>	Once in a calendar year	\$10 copayment plus the cost of any non-covered services, e.g. progressive lenses (no line bifocals), polycarbonate lenses, tints, etc.	\$10 copayment plus any cost in excess of a provider reimbursement of up to: \$25 for <i>Single Vision</i> , \$40 for <i>Bifocal</i> , \$55 for <i>Trifocal</i> , and \$80 for <i>Lenticular Lenses</i>
Eyeglass Frames	Once in two calendar years	\$15 copayment plus 80% of any cost in excess of the \$115 retail frame allowance (a 20% discount on retail costs in excess of \$115)	\$15 copayment plus any cost in excess of a frame allowance of up to \$45
Contact Lenses	Once in a calendar year	Any costs in excess of a \$105 allowance for <i>elective contacts</i> . The patient pays only a \$10 copayment for <i>medically necessary contact lenses</i> *. The plan also includes a 15% discount on a contact lens exam and fitting.	Any costs in excess of a \$105 allowance for <i>elective contacts</i> and a \$210 allowance for <i>medically necessary contact lenses</i> *.

Additional Discounts include (1) a 20% discount on additional pairs of prescription glasses (including prescription sunglasses) purchased within 12 months from the same VSP provider who performed the patient's last covered exam and (2) a discount on the cost of PRK and LASIK surgery performed by VSP contracted laser centers.

***Medically necessary contact lenses** are prescribed by a doctor for certain conditions including: certain conditions of anisometropia and keratoconus, following cataract surgery, and to correct extreme vision problems that cannot be corrected with eyeglasses.

Contact Vision Service Plan at 1-800-877-7195 or at www.vsp.com to locate VSP member providers.