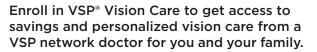
# A Look at Your VSP Vision Coverage

With VSP and Goshen, your health comes first.



#### 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 over \$3,000 in savings.

#### Provider choices you want.



Maximize your benefits at a Premier Program location, which is part of our incredible network of doctors.

#### Shop online and connect your benefits.

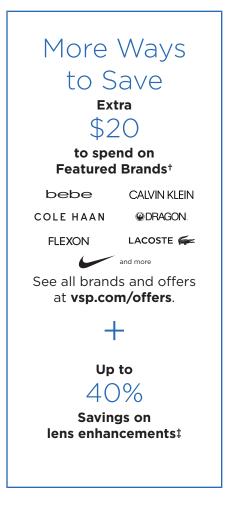
eyeconic<sup>®</sup> is the preferred VSP online retailer where you can shop in-network with your vision benefits. See your savings in real time when you shop over 70 brands of contacts, eyeglasses, and sunglasses.

#### Quality vision care you need.

You'll get great care from a VSP network doctor, including a WellVision Exam<sup>®</sup>. 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. vision care



Enroll through your employer today. Contact us: **800.877.7195** or **vsp.com** 

## Your VSP Vision Benefits Summary

Goshen and VSP provide you with a choice of affordable vision plans. Choose the eye care essentials, or upgrade to give your eyes extra love.

BENEFIT	DESCRIPTION	COPAY
Stan	dard Plan Coverage with a VSP Provide	er
WELLVISION EXAM	<ul> <li>Focuses on your eyes and overall wellness</li> <li>Every 12 months</li> </ul>	\$10
ESSENTIAL MEDICAL EYE CARE	<ul> <li>Retinal screening for members with diabetes</li> <li>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.</li> <li>Coordination with your medical coverage may apply. Ask your VSP doctor for details.</li> <li>Available as needed</li> </ul>	\$0 per screening \$20 per exam
PRESCRIPTION	GLASSES	\$25
FRAME	<ul> <li>\$150 frame allowance</li> <li>\$170 featured frame brands allowance</li> <li>20% savings on the amount over your allowance</li> <li>\$80 Walmart*/Sam's Club*/Costco* frame allowance</li> <li>Every 24 months</li> </ul>	Included in Prescription Glasses
LENSES	<ul> <li>Single vision, lined bifocal, and lined trifocal lenses</li> <li>Every 12 months</li> </ul>	Included in Prescription Glasses
LENS ENHANCEMENTS	<ul> <li>Impact-resistant lenses</li> <li>Standard progressive lenses</li> <li>Premium progressive lenses</li> <li>Custom progressive lenses</li> <li>Average savings of 40% on other lens enhancements</li> <li>Every 12 months</li> </ul>	\$0 \$0 \$80 - \$90 \$120 - \$160
CONTACTS (INSTEAD OF GLASSES)	<ul> <li>\$130 allowance for contacts; copay does not apply</li> <li>Contact lens exam (fitting and evaluation)</li> <li>Every 12 months</li> </ul>	Up to \$60
YOUR COVERAGE	E GOES FURTHER IN-NETWORK	

With so many in-network choices, VSP makes it easy to get the most out of your benefits. You'll have access to preferred private practice, retail, and online in-network choices. Log in to **vsp.com** to find an in-network provider.

#### PROVIDER NETWORK:

VSP Signature
EFFECTIVE DATE:

01/01/2023



BENEFIT	DESCRIPTION	COPAY	
Premium Plan Coverage with a VSP Provider			
WELLVISION EXAM	<ul> <li>Focuses on your eyes and overall wellness</li> <li>Every 12 months</li> </ul>	\$10	
ESSENTIAL MEDICAL EYE CARE	<ul> <li>Retinal screening for members with diabetes</li> <li>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.</li> <li>Coordination with your medical coverage may apply. Ask your VSP doctor for details.</li> <li>Available as needed</li> </ul>	\$0 per screening \$20 per exam	
PRESCRIPTION	GLASSES	\$15	
FRAME	<ul> <li>\$150 frame allowance</li> <li>\$170 featured frame brands allowance</li> <li>20% savings on the amount over your allowance</li> <li>\$80 Walmart*/Sam's Club*/Costco* frame allowance</li> <li>Every 12 months</li> </ul>	Included in Prescription Glasses	
LENSES	<ul> <li>Single vision, lined bifocal, and lined trifocal lenses</li> <li>Every 12 months</li> </ul>	Included in Prescription Glasses	
LENS ENHANCEMENTS	<ul> <li>Impact-resistant lenses</li> <li>Tints/Light-reactive lenses</li> <li>Standard progressive lenses</li> <li>Premium progressive lenses</li> <li>Custom progressive lenses</li> <li>Average savings of 40% on other lens enhancements</li> <li>Every 12 months</li> </ul>	\$0 \$0 \$80 - \$90 \$120 - \$160	
CONTACTS (INSTEAD OF GLASSES)	<ul> <li>\$130 allowance for contacts; copay does not apply</li> <li>Contact lens exam (fitting and evaluation)</li> <li>Every 12 months</li> </ul>	Up to \$60	

### YOUR COVERAGE GOES FURTHER IN-NETWORK

With so many in-network choices, VSP makes it easy to get the most out of your benefits. You'll have access to preferred private practice, retail, and online in-network choices. Log in to **vsp.com** to find an in-network provider.

	<ul> <li>Glasses and Sunglasses</li> <li>Extra \$20 to spend on featured frame brands. Go to vsp.com/offers for details.</li> <li>30% savings on additional glasses and sunglasses, including lens enhancements, from the same VSP provider on the same day as your WellVision Exam. Or get 20% from any VSP provider within 12 months of your last WellVision Exam.</li> </ul>
EXTRA SAVINGS	<ul> <li>Routine Retinal Screening</li> <li>No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam</li> </ul>
	<ul> <li>Laser Vision Correction</li> <li>Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities</li> <li>After surgery, use your frame allowance (if eligible) for sunglasses from any VSP doctor</li> </ul>

<sup>†</sup>Only available to VSP members with applicable plan benefits. Frame brands and promotions are subject to change.

tSavings 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.

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