# **2023 VISION BENEFITS AT A GLANCE**

# **NEW FOR 2023!**

#### Vision

Tipp City Schools is offering NEW Voluntary Vision insurance to eligible employees through VSP Vision Care. This benefit is 100% paid by you. Please see below for a brief description of your benefits and monthly cost.



	In-Network Benefits	
Exam		
Well Vision Exam	\$10 copay; once every 12 months	
Routine Retinal Screening	\$10 copay, not to exceed \$39; once every 12 months	
Contact Lens Exam, Fitting and Evaluation	\$10 copay, not to exceed \$60; once every 12 months	
Materials		
Frames	\$10 copay, \$130 allowance; 20% off balance;	
	once every 24 months	
Lenses	Covered in full after \$10 copay; once every 12 months	
(Single / Bifocal / Trifocal / Lenticular / Standard Progressive)		
Elective Contact Lenses	Covered in full up to \$130 allowance: once every 12 months	
Necessary Contact Lenses	\$10 copay; once every 12 months	
(In leu of frames and lenses)		
Additional Benefits		
Laser Correction Surgery Discount	15%-20% off retail price or 5% off promotional price	

## MONTHLY EMPLOYEE COSTS

Employee	Employee & Spouse	Employee & Child(ren)	Employee & Family
\$8.63	\$14.53	\$14.83	\$23.91

## **CARRIER CONTACTS**

Carrier Name	Contact Information	Phone Number	Website
VSP	Member Services	800.877.7195	www.vsp.com



This brochure summarizes the benefit plans that are available to Tipp City Schools eligible employees and their dependents. Official plan documents, policies and certificates of insurance contain the details, conditions, maximum benefit levels and restrictions on benefits. These documents govern your benefits program. If there is any conflict, the official documents prevail. These documents are available upon request through the Human Resources Department. Information provided in this brochure is not a guarantee of benefits.