A Look at your VSP Vision Coverage

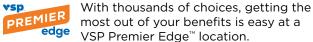
With VSP and COVINGTON LOCAL SCHOOLS, your health comes first.

As a member, you'll 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 over \$3,000 in savings.

Provider choices you want.



edge VSP Premier Edge[™] location. Shop online and connect your benefits.

Eyeconic[®] is the preferred VSP online retailer where you can shop in-network

most out of your benefits is easy at a

eyeconic 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®. 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.

PROVIDER NETWORK:

VSP Signature

EFFECTIVE DATE:

01/01/2024

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To learn about you the VSP Notice of I

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VSP, Eyeconic, and Premier Edge are tr of Marchon Eyewea 102898 VCCM Classification: Rest

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Contact us at:
800.877.7195 or vsp.com
retail chain may be different or not apply.
ember satisfaction from VSP providers only. Coverage information is subject event of a conflict between this information and your organization's contract is of the contract will prevail. Based on applicable laws, benefits may vary by te of Washington, VSP Vision Care, Inc., is the legal name of the corporation P does business. TruHearing is not available directly from VSP in the states of hington.
Ir privacy rights and how your protected health information may be used, see Privacy Practices on vsp.com .
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YOUR COVERAGE WITH A VSP PROVIDERWELLVISION EXAM• Focuses on your eyes and overall wellness • Every calendar year\$10*• Retinal screening for members with diabetes • 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 doctor for details. • Available as needed\$20 per examPRESCRIPTION GLASSES\$25FRAME*• \$170 featured frame brands allowance • \$150 frame allowance • \$150 Walmart*/Sam's Club*/Costo* frame allowance • Every other calendar yearIncluded in Prescription Glasses \$0LENSES• Single vision, lined bifocal, and lined trifocal lenses • Every calendar yearIncluded in Prescription Glasses \$0LENSES• Standard progressive lenses • Premium progressive lenses • Premium progressive lenses • Premium progressive lenses • Rub-t-resistant lenses • Premium progressive lenses • Standard progressive lenses • Premium progressive lenses • Premium progressive lenses • Standard progressive lenses • Premium progressive lenses • Premium progressive lenses • Premium progressive lenses • Premium progressive lenses • \$120 - \$160	BENEFIT	DESCRIPTION	COPAY	
Wellusion EXAMwellness\$10EXAM• Every calendar year\$10• Every calendar year• Retinal screening for members with diabetes\$0 per screening \$20 per exam• 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 doctor for details. • Available as neededPRESCRIPTION GLASSES\$25FRAME*• \$170 featured frame brands allowance • \$150 frame allowance • \$150 walmart /Sam's Club/Costco* frame allowance • \$150 Walmart /Sam's Club/Costco* frame allowance • Every calendar yearIncluded in Prescription Glasses \$0LENSES• Standard progressive lenses • Impact-resistant lenses • Premium progressive lenses • Custom progressive lenses • Custom progressive lenses • Custom progressive lenses • Average savings of 40% on other lens enhancements\$10	YOUR COVERAGE WITH A VSP PROVIDER			
essential mediactional 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 doctor for details. • Available as needed\$25PRESCRIPTION GLASSES\$25FRAME*\$170 featured frame brands allowance • \$150 frame allowance • \$150 frame allowance • \$150 walmart*/Sam's Club*/Costco* frame allowance • \$150 walmart*/Sam's Club*/Costco* frame allowance • Every other calendar yearIncluded in Prescription Glasses \$0LENSESSingle vision, lined bifocal, and lined trifocal lenses • Premium progressive lenses • Premium progressive lenses • Custom progressive lenses • Standard progressive lenses • Custom progressive lenses • Premium progressive lenses • Custom p		wellness	\$10	
FRAME* • \$170 featured frame brands allowance • \$150 frame allowance • \$150 frame allowance • 20% savings on the amount over your allowance • \$150 Walmart*/Sam's Club*/Costco* frame allowance • Included in Prescription Glasses • \$150 Walmart*/Sam's Club*/Costco* frame allowance • Single vision, lined bifocal, and lined trifocal lenses • Single vision, lined bifocal, and lined trifocal lenses • Standard progressive lenses • Standard progressive lenses • Standard progressive lenses \$0 • Premium progressive lenses \$0 • Average savings of 40% on other lens enhancements \$120 - \$160	MEDICAL EYE CARE	 diabetes 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 doctor for details. Available as needed 	\$20 per exam	
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LENSES lined trifocal lenses Prescription Glasses • Every calendar year Prescription Glasses • Standard progressive lenses \$0 • Impact-resistant lenses \$0 • Premium progressive lenses \$0 • Custom progressive lenses \$120 - \$160 • Average savings of 40% on other lens enhancements \$120 - \$160	FRAME⁺	allowance \$150 frame allowance 20% savings on the amount over your allowance \$150 Walmart*/Sam's Club*/Costco* frame allowance		
LENS ENHANCEMENTS• Impact-resistant lenses\$0• Premium progressive lenses • Custom progressive lenses • Average savings of 40% on other lens enhancements\$120 - \$160	LENSES	lined trifocal lenses		
		 Impact-resistant lenses Premium progressive lenses Custom progressive lenses Average savings of 40% on other lens enhancements 	\$0 \$80 - \$90	
CONTACTS (INSTEAD OF GLASSES)• \$150 allowance for contacts; copay does not apply • Contact lens exam (fitting and evaluation) • Every calendar yearUp to \$60	(INSTEAD OF	does not applyContact lens exam (fitting and evaluation)	Up to \$60	
 Routine Retinal Screening No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam 		• No more than a \$39 copay on routine retinal screening		
EXTRA SAVINGSLaser Vision Correction• Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities • After surgery, use your frame allowance (if eligible) for		 Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities After surgery, use your frame allowance (if eligible) 		
sunglasses from any VSP doctor YOUR COVERAGE GOES FURTHER IN-NETWORK				

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