# A Look at Your VSP Vision Coverage

With VSP and ARLINGTON PUBLIC SCHOOLS, your health comes first.



Enroll in VSP<sup>®</sup> 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 over \$3,000 in savings.

#### Provider choices you want.

PREMIER

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.

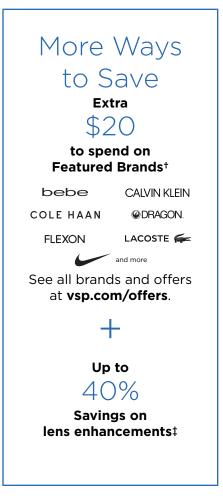
#### Quality vision care you need.

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.

#### **VSP EasyOptions**

Each member on your plan can personalize their benefit with ease. Choose the upgrade that's right for you! Check out the plan grid to see your options.

## **vsp** vision care



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

### Your VSP Vision Benefits Summary

ARLINGTON PUBLIC SCHOOLS and VSP provide you with an affordable vision plan.

**PROVIDER NETWORK:** 

**VSP** Signature EFFECTIVE DATE:

01/01/2023



BENEFIT	DESCRIPTION	COPAY	FREQUENCY
Your Coverage with a VSP Provider			
WELLVISION EXAM	<ul> <li>Focuses on your eyes and overall wellness</li> </ul>	\$10	Every calendar year
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> </ul>	\$0 per screening \$20 per exam	Available as needed
PRESCRIPTION GLASSE	:S	\$20	
FRAME <sup>*</sup>	<ul> <li>\$170 featured frame brands allowance</li> <li>\$150 frame allowance</li> <li>20% savings on the amount over your allowance</li> <li>\$80 Walmart*/Sam's Club*/Costco* frame allowance</li> </ul>	Included in Prescription Glasses	Every calendar year
LENSES	<ul> <li>Single vision, lined bifocal, and lined trifocal lenses</li> <li>Impact-resistant lenses for dependent children</li> </ul>	Included in Prescription Glasses	Every calendar year
LENS ENHANCEMENTS	<ul> <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> </ul>	\$0 \$80 - \$90 \$120 - \$160	Every calendar year
CONTACTS (INSTEAD OF GLASSES)	<ul><li>\$150 allowance for contacts; copay does not apply</li><li>Contact lens exam (fitting and evaluation)</li></ul>	Up to \$60	Every calendar year
VSP EASYOPTIONS (MEMBERS CAN CHOOSE ONE OF THESE UPGRADES)	• An additional \$100 frame allowance, or fully covered premium or custom progressive lenses, or fully covered anti-glare coating, or an additional \$50 contact lens allowance.	Included in Prescription Glasses	Every calendar year
LIGHTCARE™	<ul> <li>\$250 allowance for ready-made non-prescription sunglasses, or ready-made non-prescription blue light filtering glasses, instead of prescription glasses or contacts</li> </ul>	\$20	Every calendar year
EXTRA SAVINGS	Glasses and Sunglasses         • Extra \$20 to spend on featured frame brands. Go to vsp.com/offers for details.         • 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.         Routine Retinal Screening         • No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam         Laser Vision Correction		
Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities 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.

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. ©2022 Vision Service Plan. All rights reserved.

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

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 EasyOptions plan benefits are not available Walmart, Sam's Club, or Costco.