

# A LOOK AT YOUR VSP VISION COVERAGE



## SEE HEALTHY AND LIVE HAPPY WITH HELP FROM UNIVERSITY OF ROCHESTER AND VSP.



Enroll in VSP® Vision Care to get personalized eye care from a VSP network doctor at low out-of-pocket costs.

### 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 for additional savings.

### PROVIDER CHOICES YOU WANT.



With an average of five VSP network doctors within six miles of you, it's easy to find a nearby in-network doctor or retail chain. Plus, maximize your coverage with bonus offers and additional savings that are exclusive to Premier Program locations.

**Prefer to shop online?** Use your vision benefits on Eyeconic®—the VSP preferred online retailer.

### QUALITY VISION CARE YOU NEED.



You'll get great care from a VSP network doctor, including a WellVision Exam®—a comprehensive exam designed to detect eye and health conditions.

### USING YOUR VSP 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.

### VSP is at your fingertips.

Get the VSP mobile app for free in the Apple and Google Play stores. Access your member dashboard and vision ID card on the go!

## GET YOUR PERFECT PAIR

# EXTRA \$20

TO SPEND ON  
FEATURED FRAME BRANDS\*

bebe CALVIN KLEIN COLE HAAN FLEXON

LACOSTE   NINE WEST

SEE MORE BRANDS AT [VSP.COM/OFFERS](https://vsp.com/offers).

UP  
TO **40%**  
SAVINGS ON LENS  
ENHANCEMENTS



**Enroll today! Visit [YOURBenefitsExtras.com](https://YOURBenefitsExtras.com).**

Contact us: **800.877.7195** or [vsp.com](https://vsp.com)

## YOUR VSP VISION BENEFITS SUMMARY

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

### PROVIDER NETWORK:

VSP Choice

### EFFECTIVE DATE:

01/01/2020



Benefit	Description	Copay
<b>UR Vision Basic Coverage with a VSP Provider</b>		
<b>Your Monthly Contribution</b>	<ul style="list-style-type: none"> <li>\$4.07 Member only</li> <li>\$8.12 Member + spouse or domestic partner</li> <li>\$8.70 Member + child(ren)</li> <li>\$13.89 Member + family</li> </ul>	
<b>WellVision Exam</b>	<ul style="list-style-type: none"> <li>Focuses on your eyes and overall wellness</li> <li>Every calendar year</li> </ul>	\$35
<b>PRESCRIPTION GLASSES</b>		
<b>Frame</b>	<ul style="list-style-type: none"> <li>20% off a complete pair of prescription glasses</li> <li>A total \$100 allowance for frame, lenses and lens enhancements, or contacts</li> <li>Every calendar year</li> </ul>	N/A
<b>Lenses</b>	<ul style="list-style-type: none"> <li>20% off a complete pair of prescription glasses</li> <li>A total \$100 allowance for frame, lenses and lens enhancements, or contacts</li> <li>Every calendar year</li> </ul>	N/A
<b>Lens Enhancements</b>	<ul style="list-style-type: none"> <li>20% off a complete pair of prescription glasses</li> <li>A total \$100 allowance for frame, lenses and lens enhancements, or contacts</li> <li>Every calendar year</li> </ul>	N/A
<b>Contacts (instead of glasses)</b>	<ul style="list-style-type: none"> <li>\$100 allowance for contacts and contact lens exam</li> <li>15% savings on contact lens exam (fitting and evaluation)</li> <li>Every calendar year</li> </ul>	N/A
<b>EXTRA SAVINGS</b>	<b>Glasses and Sunglasses</b> <ul style="list-style-type: none"> <li>20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP provider within 12 months of your last WellVision Exam</li> </ul>	
	<b>Laser Vision Correction</b> <ul style="list-style-type: none"> <li>Average 15% savings on the regular price or 5% savings on the promotional price; discounts only available from contracted facilities</li> </ul>	

Benefit	Description	Copay
<b>UR Vision Plus Coverage with a VSP Provider</b>		
<b>Your Monthly Contribution</b>	<ul style="list-style-type: none"> <li>\$7.92 Member only</li> <li>\$15.82 Member + spouse or domestic partner</li> <li>\$16.94 Member + child(ren)</li> <li>\$27.06 Member + family</li> </ul>	
<b>WellVision Exam</b>	<ul style="list-style-type: none"> <li>Focuses on your eyes and overall wellness</li> <li>Every calendar year</li> </ul>	\$20
<b>PRESCRIPTION GLASSES</b>		
<b>Frame</b>	<ul style="list-style-type: none"> <li>\$200 allowance for a wide selection of frames</li> <li>\$220 allowance for featured frame brands</li> <li>20% savings on the amount over your allowance</li> <li>\$110 Costco® frame allowance</li> <li>Every calendar year</li> </ul>	Included in Prescription Glasses
<b>Lenses</b>	<ul style="list-style-type: none"> <li>Single vision, lined bifocal, and lined trifocal lenses</li> <li>Impact-resistant lenses for dependent children</li> <li>Every calendar year</li> </ul>	Included in Prescription Glasses
<b>Lens Enhancements</b>	<ul style="list-style-type: none"> <li>Standard progressive lenses</li> <li>Premium progressive lenses</li> <li>Custom progressive lenses</li> <li>Average savings of 20-25% on other lens enhancements</li> <li>Every calendar year</li> </ul>	\$0 \$95 - \$105 \$150 - \$175
<b>Contacts (instead of glasses)</b>	<ul style="list-style-type: none"> <li>\$200 allowance for contacts; copay does not apply</li> <li>Contact lens exam (fitting and evaluation)</li> <li>Every calendar year</li> </ul>	Up to \$60
<b>VSP DIABETIC EYECARE PLUS PROGRAM™</b>	<ul style="list-style-type: none"> <li>Services related to diabetic eye disease, glaucoma, and age related macular degeneration (AMD). Retinal screening for eligible members with diabetes</li> <li>Limitations and coordination with your medical coverage may apply. Ask your VSP doctor for details.</li> <li>As needed</li> </ul>	\$20

### YOUR COVERAGE WITH OUT-OF-NETWORK PROVIDERS

Get the most out of your benefits and greater savings with a VSP network doctor. Call Member Services for out-of-network plan details.

Exam..... up to \$45    Contacts..... up to \$100  
Glasses..... up to \$100

<b>EXTRA SAVINGS</b>	<b>Glasses and Sunglasses</b> <ul style="list-style-type: none"> <li>Extra \$20 to spend on featured frame brands. Go to <a href="http://vsp.com/offers">vsp.com/offers</a> for details</li> <li>20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP provider within 12 months of your last WellVision Exam</li> </ul>
	<b>Routine Retinal Screening</b> <ul style="list-style-type: none"> <li>No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam</li> </ul>
	<b>Laser Vision Correction</b> <ul style="list-style-type: none"> <li>Average 15% savings on the regular price or 5% savings on the promotional price; discounts only available from contracted facilities</li> </ul>

### YOUR COVERAGE WITH OUT-OF-NETWORK PROVIDERS

Get the most out of your benefits and greater savings with a VSP network doctor. Call Member Services for out-of-network plan details.

Exam..... up to \$45    Lined Trifocal Lenses..... up to \$65  
Frames..... up to \$70    Progressive Lenses..... up to \$50  
Single Vision Lenses..... up to \$30    Contacts..... up to \$185  
Lined Bifocal Lenses..... up to \$50

Coverage with a retail chain may be different or not apply. EasyOptions Plan Benefits are not available at Walmart or Costco. VSP guarantees coverage 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.

\*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.