



## VSP Signature & VSP Choice Plans

Below is a summary of benefits available through VSP's Signature and Choice Plans.

For a complete proposal or for a network access report, please contact your VSP Representative.

		VSP Choice Plan Full-service Plan
Provider Network		
Network Disruption	N/A	1%
Claim Disruption	N/A	208
WellVision Exam <sup>®</sup>	Thorough eye exam covered in full <sup>1</sup>	Same as Signature Plan
Lenses	Glass or plastic, single vision, lined bifocal, lined trifocal, or lenticular prescription lenses are covered in full <sup>1</sup>	Same as Signature Plan
Lens Options	Photochromic and UV protection are covered in full.	Same as Signature Plan
	Dependent children are eligible for covered in full polycarbonate prescription lenses	Same as Signature Plan
Frame	Frames are covered in full <sup>1</sup> up to the retail allowance of \$150	Same as Signature Plan
	20% off any amount above the allowance	Same as Signature Plan
Contact Lenses	15% off contact lens services, excluding materials	Same as Signature Plan
	Instead of eyeglasses, elective contact lens services and materials are covered up to \$150 toward any type of prescription contact lenses	Same as Signature Plan
	Necessary contact lenses are covered-in-full <sup>1</sup> for members who have specific conditions for which contact lenses provide better visual correction.	Same as Signature Plan
Laser VisionCare Preferred Program	Through VSP's Laser VisionCare Preferred Program, you are provided a one time \$250 allowance per eye to use towards the cost of laser vision correction surgery.	Same as Signature Plan
Eye Health Management Program <sup>®</sup>	Includes member materials, care from VSP providers, and data that supports your wellness initiatives	Same as Signature Plan
Laser VisionCare	Discounts averaging 15-20% off or 5% off a promotional offer for laser surgery including PRK, LASIK, and Custom LASIK <sup>2</sup>	Same as Signature Plan
Non-VSP Schedule of Allowances	Exam - \$30, Single Vision Lenses - \$20, Bifocal Lenses - \$35, Trifocal Lenses - \$45, Lenticular Lenses - \$75, Progressives - \$45 Elective Contact Lenses - \$75, Frame - \$25, Necessary Contact Lenses - \$250	Exam - \$45, Single Vision Lenses - \$30, Bifocal Lenses - \$50, Trifocal Lenses - \$65, Lenticular Lenses - \$100, Progressives - \$50, Elective Contact Lenses - \$105, Frame - \$70, Necessary Contact Lenses - \$250
Value-added Benefits	30% off unlimited additional pairs of prescription glasses and/or non-prescription sunglasses <sup>3</sup> Guaranteed pricing on all other lens options, saving our members an average of 35-40%	20% off unlimited additional pairs of prescription glasses and/or non-prescription sunglasses Guaranteed pricing on the most popular lens options, saving our members an average of 20-25% <sup>4</sup>

<sup>1</sup> Less any applicable copay

<sup>2</sup> Using wavefront technology with the microkeratome surgical device only. Other LASIK procedures may be performed at an additional cost to the member. Laser VisionCare discounts are only available from VSP-contracted facilities.

<sup>3</sup> 30% discount applies to glasses purchased the same day as the member's eye exam from the same VSP Preferred Provider who provided the exam. Members will also receive 20% off unlimited additional pairs of glasses valid through any VSP Preferred Provider within 12 months of the last covered eye exam.

<sup>4</sup> Most popular lens options include progressives, anti-reflective, photochromics, scratch resistant coating, polycarbonate, plastic dyes, and UV protection. All other lens options available at 20% discount.