SEE HEALTHY AND LIVE HAPPY WITH HELP FROM EUTF AND VSP.

As a VSP® member, you get personalized 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. Plus, maximize your coverage with bonus offers and additional savings that are exclusive to Premier Program locations.

Like shopping online? Go to eyeconic.com and use your vision benefits to shop over 50 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—a comprehensive exam designed to detect eye and health conditions.

GET YOUR PERFECT PAIR

EXTRA $20 TO SPEND ON FEATURED FRAME BRANDS* + UP TO 40% SAVINGS ON LENS ENHANCEMENTS

SEE MORE BRANDS AT VSP.COM/OFFERS.

Contact us: 866.240.8420 or vsp.com
### YOUR VSP VISION BENEFITS SUMMARY
VSP provides EUTF & HSTA VB RETIREES with an affordable vision plan.

#### BENEFIT | DESCRIPTION | COPAY | FREQUENCY
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**YOUR COVERAGE WITH A VSP PROVIDER**
**WELLVISION EXAM** | Focuses on your eyes and overall wellness | $10 | Every calendar year

**PRESCRIPTION GLASSES**
**FRAME** | $150 frame allowance | $25 | See frame and lenses
| $170 featured frame brands allowance | | |
| 20% savings on the amount over your allowance | Included in Prescription Glasses | Every other calendar year

**LENSES**
| Single vision, lined bifocal, and lined trifocal lenses | Included in Prescription Glasses | Every calendar year
| Impact-resistant lenses for dependent children up to age 18 | |

**LENS ENHANCEMENTS**
| Standard progressive lenses | $0 | Every calendar year
| UV protection | $0 | |
| Premium progressive lenses | $80 - $90 | |
| Custom progressive lenses | $120 - $160 | |
| Average savings of 40% on other lens enhancements | |

**CONTACTS (INSTEAD OF GLASSES)**
| $130 allowance for contacts; copay does not apply | Up to $60 | Every calendar year
| Contact lens exam (fitting and evaluation) | |

**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
  - After surgery, use your frame allowance (if eligible) for sunglasses from any VSP doctor

#### 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
- **Frame** up to $47
- **Single Vision Lenses** up to $45
- **Lined Bifocal Lenses** up to $65
- **Lined Trifocal Lenses** up to $85
- **Progressive Lenses** up to $85
- **Contacts** up to $105

Coverage with a retail chain may be different or not apply. Log in to vsp.com to check your benefits for eligibility and to confirm in-network locations based on your plan type. VSP guarantees coverage from VSP network 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.*

Classification: Restricted

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