# A Look at Your VSP Vision Coverage

With VSP and IBEW LOCAL NO. 640 AND ARIZONA CHAPTER NECA H&W TRUST FUND, 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.

With private practice doctors and Visionworks retail locations to choose from nationwide, getting the most out of your benefits is easy at a VSP Premier Edge<sup>™</sup> location.

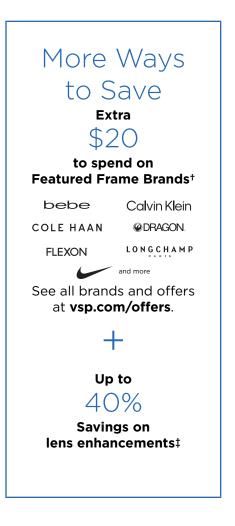


## Quality vision care you need.

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.

#### Using your 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.



# Your VSP Vision Benefits Summary IBEW LOCAL NO. 640 AND ARIZONA CHAPTER NECA H&W TRUST FUND and VSP provide you with an

affordable vision plan.

**PROVIDER NETWORK:** 

EFFECTIVE DATE:

**VSP** Choice

01/01/2024



| BENEFIT   | DESCRIPTION   | COPAY                                  | FREQUENCY                       |
|---|---|--|---------------------------------|
| Your Coverage with a VSP Provider   |   |  |                                 |
| WELLVISION EXAM   | <ul><li>Focuses on your eyes and overall wellness</li><li>Routine retinal screening</li></ul>   | \$10<br>Up to \$39                     | Every calendar year             |
| ESSENTIAL MEDICAL<br>EYE CARE   | <ul> <li>Retinal imaging for members with diabetes covered-in-full</li> <li>Additional exams and services beyond routine care to treat<br/>immediate issues from pink eye to sudden changes in vision or<br/>to monitor ongoing conditions such as dry eye, diabetic eye<br/>disease, glaucoma, and more.</li> <li>Coordination with your medical coverage may apply. Ask your<br/>VSP network doctor for details.</li> </ul> | \$20 per exam                          | Available as needed             |
| PRESCRIPTION GLASSES  |   | \$10                                   | See frame and lenses            |
| FRAME⁺  | <ul> <li>\$245 Featured Frame Brands allowance</li> <li>\$225 frame allowance</li> <li>20% savings on the amount over your allowance</li> <li>\$120 Costco frame allowance</li> </ul>   | Included in<br>Prescription<br>Glasses | Every calendar year             |
| LENSES  | Single vision, lined bifocal, and lined trifocal lenses   | Included in<br>Prescription<br>Glasses | Every calendar year             |
| LENS ENHANCEMENTS   | <ul> <li>Standard progressive lenses</li> <li>Premium progressive lenses</li> <li>Custom progressive lenses</li> <li>Impact-resistant lenses</li> <li>Scratch-resistant coating</li> <li>Average savings of 30% on other lens enhancements</li> </ul>   | \$0<br>\$40<br>\$40<br>\$0<br>\$0      | Every calendar year             |
| CONTACTS (INSTEAD<br>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 LIGHTCARE <sup>™</sup> +  | <ul> <li>\$225 allowance for ready-made non-prescription sunglasses, or<br/>ready-made non-prescription blue light filtering glasses, instead<br/>of prescription glasses or contacts</li> </ul>  | \$10                                   | Every calendar year             |
| <ul> <li>Glasses and Sunglasses</li> <li>Discover all current eyewear offers and savings at vsp.com/offers.</li> <li>20% savings on unlimited additional pairs of prescription or non-prescription glasses/sunglasses, including lens enhancements, from a VSP provider within 12 months of your last WellVision Exam.</li> <li>Laser Vision Correction         <ul> <li>Average of 15% off the regular price; discounts available at contracted facilities.</li> </ul> </li> </ul> |   |  | , , , ,                         |
|   | <ul> <li>Exclusive Member Extras for VSP Members</li> <li>Contact lens rebates, lens satisfaction guarantees, and more offers at vsp.com/offers.</li> <li>Save up to 60% on digital hearing aids with TruHearing<sup>®</sup>. Visit vsp.com/offers/special-offers/hearing-aids for details.</li> <li>Enjoy everyday savings on health, wellness, and more with VSP Simple Values.</li> </ul>                                  |  |                                 |
| COVERAGE WITH AN OL   | IT-OF-NETWORK PROVIDER  |  |                                 |
|   | hoices, VSP makes it easy to get the most out of your benefits. You'll have   | access to preferred                    | d private practice, retail, and |

online in-network choices. Log in to vsp.com to find an in-network provider. Your plan provides the following out-of-network reimbursements: Lined Bifocal Lenses ...... up to \$50 Exam ..... up to \$45 Progressive Lenses ..... up to \$50 Frame ..... up to \$70 Lined Trifocal Lenses ......up to \$65 Contacts ..... up to \$105 Single Vision Lenses .....up to \$30

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

1Savings 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 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. Premier Edge is not available for some members in the state of Texas.

To learn about your privacy rights and how your protected health information may be used, see the VSP Notice of Privacy Practices on vsp.com.

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