



VSP® Individual Vision Plans give you access to the services and products you need to care for your eyes. You'll enjoy comprehensive vision coverage and access to the personalized care you deserve all at low out-of-pocket costs. And, as a member, you'll get an annual average savings of more than \$200 on eye care and eyewear.¹

Best Choice For Vision Coverage

As a not-for-profit vision care company, VSP puts their members first and is dedicated to helping you maintain excellent eye health for a lifetime of good vision. And VSP guarantees your satisfaction. If you're not 100% satisfied with your eye care and eyewear, they'll make it right.

Best Access To Doctors

With more than 34,000 network doctors, you're sure to find a practice close by. Your VSP network doctor will help keep you and your eyes healthy with a comprehensive eye exam that aids in early detection of health conditions.

Best Eyewear Choices

VSP network doctors feature a wide selection of designer frames to fit your style and budget. Plus, you'll also get an extra \$20 to spend when you choose a featured frame brand.²

¹Comparison based on national average for comprehensive eye exams and most commonly purchased brands. This number represents typical savings for VSP members when they see a VSP network doctor.

²Extra \$20 to spend is in addition to your allowance. Check your frame coverage section in My Benefits at vsp.com to see if this offer applies. Brands and promotions subject to change.

Product Details (States FL & OR on next page)

Stope Stop			<u> </u>	
Exam: Lenses: Frame: Benefit Participating Provider WellVision Exam Contact Lens Exam Covered after \$10 Exam Copay 15% Savings on a contact lens exam Lenses: Participating Provider Non-Participating Provider Up to \$45 after \$10 Exam Copay Up to \$45 after \$10 Exam Copay Up to \$	Сорау	\$10 Exam / \$25 Materials	\$10 Exam / \$25 Materials per Covered Person per Office Visit	
Every 12 months Every 24 months Benefit Participating Provider Covered after \$10 Exam Copay 15% Savings on a contact lens exam Lenses: Participating Provider VellVision Exam Contact Lens Exam Covered after \$10 Exam Copay 15% Savings on a contact lens exam Lenses: Participating Provider Non-Participating Provider Non-Participating Provider Up to \$30.00 after \$25 Materials Copay Up to \$50.00 after \$25 Materials Copay Up to \$50.00 after \$25 Materials Copay Up to \$50.00 after \$25 Materials Copay Up to \$65.00 after \$25 Materials Copay Up to \$65.00 after \$25 Materials Copay Up to \$100.00 after \$25 Materials Copay	Benefit	Frequency		
Covered after \$10 Exam Copay 15% Savings on a contact lens exam Lenses: Participating Provider Single Vision Lined BiFocal Lined TriFocal Lenticular Lenticular Lenses for children Frames Non-Participating Provider Covered after \$25 materials Copay Covered after \$25 materials Copay Lined TriFocal Lenticular Lenticular Lenticular Lenticular Lenticular Single Vision Covered after \$25 materials Copay Covered after \$25 materials Copay Lovered a	Lenses:	Every 12 months		
Lenses: Participating Provider Single Vision Lined BiFocal Lenticular Lenticular Lenticular Lenticular Lenses for children Frames Non-Participating Provider Non-Participating Provider Up to \$30.00 after \$25 Materials Copay Up to \$50.00 after \$25 Materials Copay Up to \$50.00 after \$25 Materials Copay Up to \$65.00 after \$25 Materials Copay Up to \$65.00 after \$25 Materials Copay Up to \$100.00 after \$25 Materials Copay	Benefit	Participating Provider	Non-Participating Provider	
Single Vision Covered after \$25 materials Copay Lined BiFocal Covered after \$25 materials Copay Up to \$30.00 after \$25 Materials Copay Up to \$50.00 after \$25 Materials Copay Up to \$65.00 after \$25 Materials Copay Up to \$65.00 after \$25 Materials Copay Up to \$65.00 after \$25 Materials Copay Up to \$100.00 after \$25 Materials Copay		• •	Up to \$45 after \$10 Exam Copay	
Lined BiFocal Covered after \$25 materials Copay Lined TriFocal Covered after \$25 materials Copay Up to \$50.00 after \$25 Materials Copay Up to \$65.00 after \$25 Materials Copay Up to \$65.00 after \$25 Materials Copay Up to \$100.00 after \$25 Materials Copay	Lenses:	Participating Provider	Non-Participating Provider	
= = = = = = = = = = = = = = = = = = =	Lined BiFocal Lined TriFocal Lenticular Impact-Resistant (polycarbonate) lenses for children Frames Necessary Contact Lenses*	Covered after \$25 materials Copay Covered after \$25 materials Copay Covered after \$25 materials Copay Fully covered with no Copay up to age 18 \$150 allowance every 24 months \$150 allowance every 12 months	Up to \$50.00 after \$25 Materials Copay Up to \$65.00 after \$25 Materials Copay Up to \$100.00 after \$25 Materials Copay Up to \$70.00 allowance every 24 months Up to \$105.00 allowance every 12 months	

- Average 20-25% savings on other lens enhancements
- 20% off additional glasses and sunglasses, including lens enhancements, from any VSP doctor within 12 months of the patient's last WellVision Exam.
- Extra \$20 to \$40 on featured frame brands. Brands and promotions subject to change.
- Laser Vision Correction- Average 15% savings on the regular price or 5% savings on the promotional price from the contracted facilities.

^{*}Contact Lenses are provided in lieu of all other lens once every I2 months and frames once every 24 months.

Product Details (States FL & OR)

Copay		\$10 Exam / \$25 Materials per Covered Person per Office Visit	
Benefit			
Exam: Lenses: Frame:		Every 12 months Every 12 months Every 12 months	
Benefit	Participating Provid	er	Non-Participating Provider
WellVision Exam Contact Lens Exam	Covered after \$10 Exam 15% Savings on a contact	' '	Up to \$45 after \$10 Exam Copay
Lenses:	Participating Provide	ler	Non-Participating Provider
Single Vision Lined BiFocal Lined TriFocal Lenticular Impact-Resistant (polycarbonate) lenses for children Frames Necessary Contact Lenses* Elective Contact Lenses*	Covered after \$25 mater Covered after \$25 mater Covered after \$25 mater Covered after \$25 mater Fully covered with no Co \$120 allowance every 12 \$120 allowance every 12 N/A	rials Copay rials Copay rials Copay rials Copay ppay up to age 18 months	Up to \$30.00 after \$25 Materials Copay Up to \$50.00 after \$25 Materials Copay Up to \$65.00 after \$25 Materials Copay Up to \$100.00 after \$25 Materials Copay Up to \$70.00 allowance every 12 months Up to \$105.00 allowance every 12 months N/A
Discounts & Savings			

- Average 20-25% savings on other lens enhancements.
- 20% off additional glasses and sunglasses, including lens enhancements, from any VSP doctor within 12 months of the patient's last WellVision Exam.
- Extra \$20 to \$40 on featured frame brands. Brands and promotions subject to change.
- Laser Vision Correction- Average 15% savings on the regular price or 5% savings on the promotional price from the contracted facilities.

Products are not available in all states. Please call 800-979-8266 to verify current state availability.

Underwritten by VSP Vision Care.

^{*}Contact Lenses are provided in lieu of all other lens and frames once every 12 months.

National Care Vision FAQ

Does my vision plan have any waiting periods?

There are NO WAITING PERIODS! All benefits begin on your effective date.

Who is eligible to purchase the plan?

The insurance coverage is available in states where it's approved to anyone age 18 and older. You can request coverage for your dependents; dependent eligibility varies based on State law.

Can I purchase a vision plan if my employer or health plan does not provide one? Yes, anyone can take advantage of the VSP Extend Plan.

Do I have coverage if I travel outside of the State I live in?

How do I submit claims?

In-network

- · Using your VSP benefit is easy. Create an account at vsp.com. Once your annual plan is effective, review your benefit information.
- Find a VSP network doctor who's right for you. To find a doctor, visit vsp.com. Choose a Premier Program location to get the most out of your eye care benefits.
- At your appointment, tell them you have VSP. There's no ID card necessary.
- That's it! We'll handle the rest—there are no claim forms to complete.

Out-of-network

Note: If you choose to see an out-of-network provider, you'll receive less coverage. Payment is expected at the time of your visit. Following your appointment, you'll need to complete a claim form and include any itemized receipts. You can complete and submit the form on vsp.com or call 800.877.7195 to request a hard copy form. Address to Vision Service Plan, Attention: Claim Services, P.O. Box 385018, Birmingham, AL 35238-5018. Out-of-network coverage is not available in the states of Massachusetts and Washington, and coverage varies in the state of Maryland.

What if I want to cancel the policy?

Innovative Health Insurance Partners attn: National Care Vision 4201 Spring Valley Road, Suite 1500, Dallas, TX 75244 or by calling (800) 979-8266.

All Cancellation requests will be effective on the next billing period.



Contact Lens Elective

Allowance includes fitting, exam, and lenses. The cost of the fitting and evaluation is deducted from the cost of the contact lens allowance. Allowance can be applied to disposables. Applies when contacts are chosen in lieu of glasses. Members can order contacts online at www.VSP.com and apply their benefits at checkout.

Additional Glasses

20% off the retail price on additional pairs of prescription glasses (at Discount Program Provider Locations).

Frame Discount

30% off the remaining balance in excess of the frame allowance of \$150 biannually.

Laser Vision Care

An average discount of 20% on LASIK and PRK. Discounts available through VSP Vision Care for conventional and custom LASIK Procedures with the TLCVision Advantage program. For more information Please visit www.LasikPlus.com or call 1 (866) 755-2026.



VSP Exclusive Member Extras

Save Up to 60% on Brand-name Hearing Aids

Like vision loss, hearing loss can have a huge impact on your quality of life. However, the cost of a pair of quality hearing aids usually costs more than \$5,000, and few people have hearing aid insurance coverage.

TruHearing® makes hearing aids affordable by providing exclusive savings to all VSP® Vision Care members. You can save up to 60% on a pair of hearing aids with TruHearing. What's more, your dependents and even extended family members are eligible, too.

In addition to great pricing, TruHearing provides you with:

- Three provider visits for fitting and adjustments
- 45-day trial
- Three-year manufacturer warranty for repairs and one-time loss and damage replacement
- 48 free batteries per hearing aid

Plus, with TruHearing you'll get:

- Access to a national network of more than 5,500 hearing healthcare providers
- Straightforward, nationally-fixed pricing on a wide selection of the latest brand-name hearing aids
- Deep discounts on batteries shipped directly to your door

Learn more about this VSP Exclusive Member Extra at truhearing.com/vsp or call 877.396.7194 with questions.

VSP is providing information to its members, but does not offer or provide any discount hearing program. The relationship between VSP and TruHearing is that of independent contractors. VSP makes no endorsement, representations or warranties regarding any products or services offered by TruHearing, a third-party vendor. The vendor is solely responsible for the products or services offered by them. If you have any questions regarding the services offered here, you should contact the vendor directly. TruHearing offers individuals the opportunity to purchase hearing aids at discounted prices, including individuals covered by self-funded health plans not subject to state insurance or health plan regulations. TruHearing is not insurance and not subject to state insurance regulations. TruHearing provides discounts to certain health care groups for hearing aid sales and services; TruHearing provides fitting, programming and three adjustment visits at no cost; the member is obligated to pay for testing, and all post-fitting hearing care services, but will receive a discount from those health care providers who have contracted with TruHearing. Not available directly from VSP in the states of Washington and California.



Healthy Vision Association

The Healthy Vision Association is dedicated to helping its members see well and be healthy by providing access that might not be available through employers to products, services and information that promote vision and overall health.

As a Healthy Vision Association member, you'll enjoy discounts and savings on health, travel and other services that can save you hundreds of dollars each year. And, you'll have the opportunity to enroll in premium vision plans offered by VSP® Vision Care to Association members (plans offered may vary by state).

As A Member You'll Have Access To Exclusive Discount Programs.

Save on everyday goods and services, while supporting vision-related charities, too.

Car Rental Discounts

Receive special member discount rental rates from: Hertz®, Dollar Car Rental™, and Thrifty Car Rental®

Choice Hotels

Save up to 15% when booking your next overnight stay away at select hotels.

Products are not available in all states. Please call 800-979-8266 to verify current state availability.

Underwritten by VSP Vision Care.



TicketsatWork

Access to 20 - 60% off on movies, hotels, shows, concerts, sporting events and more.

TrueCar Buying Network

Members enjoy access to a dealer network offering discounts on auto purchases.

Office Depot

Receive 15% off Hundreds of Office Supplies.

UPS Express Delivery Services

Members receive various discounts on UPS delivery services.

For a complete list of discount programs, please visit HealthyVisionAssociation.com

