



Life is  
better in  
focus.™

## Get access to the best in eye care and eyewear with BUTTE SCHOOLS

### PLAN 8: C \$10 and VSP® Vision Care.

As a VSP member, you have access to care from great eye doctors, quality eyewear, and the affordability you deserve, all at the lowest out-of-pocket costs.

#### You'll like what you see with VSP.

- **Value and Savings.** You'll enjoy more value and the lowest out-of-pocket costs.
- **High Quality Vision Care.** You'll get the best care from a VSP network doctor, including a WellVision Exam®—the most comprehensive exam designed to detect eye and health conditions.
- **Choice of Providers.** The decision is yours to make—choose a VSP network doctor, a participating retail chain, or any out-of-network provider.
- **Great Eyewear.** It's easy to find the perfect frame at a price that fits your budget.

#### Using your VSP benefit is easy.

- **Create an account at [vsp.com](http://vsp.com).** Once your plan is effective, review your benefit information.
- **Find an eye doctor who's right for you.** Visit [vsp.com](http://vsp.com) or call **800.877.7195**.
- **At your appointment, tell them you have VSP.** There's no ID card necessary. If you'd like a card as a reference, you can print one on [vsp.com](http://vsp.com).

**That's it! We'll handle the rest**—there are no claim forms to complete when you see a VSP provider.

#### Choice in Eyewear

From classic styles to the latest designer frames, you'll find hundreds of options. Choose from featured frame brands like bebe®, CALVIN KLEIN, Cole Haan, Flexon®, Lacoste, Nike, Nine West, and more.<sup>1</sup> Visit [vsp.com](http://vsp.com) to find a Premier Program location that carries these brands. Plus, save up to 40% on popular lens enhancements.<sup>2</sup> Prefer to shop online? Check out all of the brands at [eyeconic.com](http://eyeconic.com)®, VSP's preferred online eyewear store.



See why we're consumers' #1 choice in vision care<sup>3</sup>.

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

# Your VSP Vision Benefits Summary



BUTTE SCHOOLS - PLAN 8: C \$10 and VSP provide you with an affordable eye care plan.

**VSP Coverage Effective Date: 10/01/2018**

**VSP Provider Network: VSP Choice**

| Benefit                                  | Description  | Copay   | Frequency       |
|--|--|---|-----------------|
| <b>Your Coverage with a VSP Provider</b> |  |   |                 |
| <b>WellVision Exam</b>                   | <ul style="list-style-type: none"> <li>Focuses on your eyes and overall wellness</li> <li>KidsCare: Children have two, fully covered WellVision exams, if needed</li> </ul>  | \$10 for exam and glasses                                   | Every 12 months |
| <b>Prescription Glasses</b>              |  |   |                 |
| <b>Frame</b>                             | <ul style="list-style-type: none"> <li>\$250 allowance for a wide selection of frames</li> <li>\$270 allowance for featured frame brands</li> <li>20% savings on the amount over your allowance</li> <li>\$135 Costco® frame allowance</li> </ul>  | Combined with exam  | Every 12 months |
| <b>Lenses</b>                            | <ul style="list-style-type: none"> <li>Single vision, lined bifocal, and lined trifocal lenses</li> <li>Polycarbonate lenses for dependent children</li> <li>KidsCare: Additional lenses for children are fully covered when needed. Minimum prescription change required.</li> </ul>  | Combined with exam  | Every 12 months |
| <b>Lens Enhancements</b>                 | <ul style="list-style-type: none"> <li>Tints/Photochromic adaptive lenses</li> <li>UV protection</li> <li>Anti-reflective Coating</li> <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> </ul>   | \$0<br>\$0<br>\$40<br>\$55<br>\$95 - \$105<br>\$150 - \$175 | Every 12 months |
| <b>Contacts (instead of glasses)</b>     | <ul style="list-style-type: none"> <li>\$150 allowance for contacts; copay does not apply</li> <li>Contact lens exam (fitting and evaluation)</li> </ul>   | Up to \$60  | Every 12 months |
| <b>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. Limitations and coordination with medical coverage may apply. Ask your VSP doctor for details.</li> </ul>  | \$20  | As needed       |
| <b>Extra Savings</b>                     | <p><b>Glasses and Sunglasses</b></p> <ul style="list-style-type: none"> <li>Extra \$20 to spend on featured frame brands. Go to <a href="http://vsp.com/specialoffers">vsp.com/specialoffers</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> <p><b>Retinal Screening</b></p> <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> <p><b>Laser Vision Correction</b></p> <ul style="list-style-type: none"> <li>Average 15% off the regular price or 5% off 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. Your coverage with out-of-network providers will be less or you'll receive a lower level of benefits. Visit [vsp.com](http://vsp.com) for plan details.

|                            |            |                             |            |                |             |
|----------------------------|------------|-----------------------------|------------|----------------|-------------|
| Exam .....                 | up to \$45 | Lined Bifocal Lenses .....  | up to \$50 | Contacts ..... | up to \$105 |
| Frame .....                | up to \$70 | Lined Trifocal Lenses ..... | up to \$65 | Tints .....    | up to \$5   |
| Single Vision Lenses ..... | up to \$30 | Progressive Lenses .....    | up to \$50 |                |             |

Coverage with a participating retail chain may be different. Once your benefit is effective, visit [vsp.com](http://vsp.com) for details. 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.

Contact us. [800.877.7195](tel:800.877.7195) | [vsp.com](http://vsp.com)

1. Brands/Promotion subject to change.  
 2. Savings based on network doctor's retail price and vary by plan and purchase selection; average savings determined after benefits are applied. Available only through VSP network doctors to VSP members with applicable plan benefits. Ask your VSP network doctor for details.  
 3. Blueocean Market Intelligence National Vision Plan Member Research, 2014  
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