



## Your Vision Benefit Summary

Keep your eyes healthy with  
CITY OF HUNTINGTON BEACH and VSP®  
Vision Care.

### Using your VSP benefit is easy.

- **Find an eyecare provider who's right for you.**  
With open access to see any eyecare provider, you can see the one who's right for you. Choose a VSP doctor or any other provider. To find a VSP doctor, visit [vsp.com](http://vsp.com) or call **800.877.7195**.
- **Review your benefit information.** Visit [vsp.com](http://vsp.com) to review your plan coverage before your appointment.
- **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 when you see a VSP doctor.

### Personalized Care

A VSP doctor provides personalized care that focuses on keeping you and your eyes healthy year after year. Plus, when you see a VSP doctor, you'll get the most out of your benefit, have lower out-of-pocket costs, and your satisfaction is guaranteed.

### Choice in Eyewear

From classic styles to the latest designer frames, you'll find hundreds of options. Choose from featured frame brands like bebe®, ck Calvin Klein, Flexon®, Lacoste, Michael Kors, Nike, Nine West, and more. Visit [vsp.com](http://vsp.com) to find a doctor who carries these brands.

### Plan Information

**VSP Coverage Effective Date:** 01/01/2016

**VSP Doctor Network:** VSP Signature

Benefit	Description	Copay
<b>Your Coverage with a VSP Doctor</b>		
<b>WellVision Exam</b>	<ul style="list-style-type: none"><li>• Focuses on your eyes and overall wellness</li><li>• Every 12 months</li></ul>	\$15 for exam and glasses

<b>Prescription Glasses</b>		
<b>Frame</b>	<ul style="list-style-type: none"><li>• \$120 allowance for a wide selection of frames</li><li>• \$140 allowance for featured frame brands</li><li>• 20% savings on the amount over your allowance</li><li>• Every 12 months</li></ul>	Combined with exam
<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>• Every 12 months</li></ul>	Combined with exam
<b>Lens Enhancements</b>	<ul style="list-style-type: none"><li>• Tints/Photochromic adaptive lenses</li><li>• Standard progressive lenses</li><li>• Premium progressive lenses</li><li>• Custom progressive lenses</li><li>• Average savings of 35-40% on other lens enhancements</li><li>• Every 12 months</li></ul>	\$0 \$50 \$80 - \$90 \$120 - \$160

<b>Contacts (instead of glasses)</b>	<ul style="list-style-type: none"><li>• \$120 allowance for contacts and contact lens exam (fitting and evaluation)</li><li>• 15% savings on a contact lens exam (fitting and evaluation)</li><li>• Every 12 months</li></ul>	\$0
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<b>Additional Coverage</b>	<ul style="list-style-type: none"><li>• Diabetic Eyecare Program</li></ul>
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<b>Extra Savings</b>	<b>Glasses and Sunglasses</b> <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>• 30% savings on additional glasses and sunglasses, including lens enhancements, from the same VSP doctor on the same day as your WellVision Exam. Or get 20% from any VSP doctor within 12 months of your last WellVision Exam.</li></ul>
	<b>Retinal Screening</b> <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>
	<b>Laser Vision Correction</b> <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><li>• After surgery, use your frame allowance (if eligible) for sunglasses from any VSP doctor</li></ul>

<b>Your Coverage with Other Providers</b>	
Visit <a href="http://vsp.com">vsp.com</a> for details, if you plan to see a provider other than a VSP doctor.	
Exam.....	up to \$50
Frame.....	up to \$70
Single Vision Lenses.....	up to \$50
Lined Bifocal Lenses.....	up to \$75
Lined Trifocal Lenses.....	up to \$100
Progressive Lenses.....	up to \$75
Contacts.....	up to \$105
Tints.....	up to \$5

VSP guarantees coverage from VSP doctors 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.

Visit [vsp.com](http://vsp.com) or call **800.877.7195**  
for more details on your vision  
coverage and exclusive savings  
and promotions for VSP members.