SEE HEALTHY AND LIVE HAPPY
WITH HELP FROM SNOHOMISH COUNTY 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®. This comprehensive 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.

GET YOUR PERFECT PAIR

EXTRA $20 + UP TO 40% SAVINGS ON LENS ENHANCEMENTS

SEE MORE BRANDS AT VSP.COM/OFFERS.

Contact us: 800.877.7195 or vsp.com

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
SNOHOMISH COUNTY and VSP provide you with an affordable vision plan.

### PROVIDER NETWORK:
VSP Choice

### EFFECTIVE DATE:
04/01/2022

### BENEFIT | DESCRIPTION | COPAY | FREQUENCY
--- | --- | --- | ---
**WELLVISION EXAM** | Focuses on your eyes and overall wellness | $0 | Every plan year*

### ESSENTIAL MEDICAL EYE CARE
- Retinal screening for members with diabetes
- Additional exams and services beyond routine care to treat immediate issues from pink eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more.
- Coordination with your medical coverage may apply. Ask your VSP doctor for details.

**FREQUENCY | COPAY | DESCRIPTION**
--- | --- | ---
Every year* | $0 per screening | $20 per exam | Available as needed

### PRESCRIPTION GLASSES

**COPAY**

| FRAME | $140 featured frame brands allowance | $120 frame allowance | $65 Costco® frame allowance | Every other plan year
| LENSES | $20 per exam | Included in Prescription Glasses | Included in Prescription Glasses | Every plan year
| LENS ENHANCEMENTS | $0 | $95 - $105 | $150 - $175 | Every plan year
| CONTACTS (INSTEAD OF GLASSES) | $120 allowance for contacts; copay does not apply | Up to $60 | Every plan year

### EXTRA SAVINGS
- Extra $20 to spend on featured frame brands. Go to vsp.com/offers for details.
- 20% savings on additional glasses and sunglasses, including lens enhancements, 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

### 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 $70
Lined Bifocal Lenses ..............................up to $50
Lined Trifocal Lenses .............................up to $65
Progressive Lenses .................................up to $50
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.

*Plan year begins in April

*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

©2022 Vision Service Plan. All rights reserved.

VSP, VSP Vision Care for Life, Eyeconic, and WellVision Exam are registered trademarks. Flexon is a registered trademark of Marchon Eyewear, Inc. All other brands or marks are the property of their respective owners.