

Your Vision Benefits Summary

Get the best in eye care and eyewear with SACRAMENTO INDEPENDENT HOTEL RESTAURANT and VSP® Vision Care.

Using your VSP benefit is easy.

- **Create an account at vsp.com.** Once your plan is effective, review your benefit information.
- **Find an eye care provider who's right for you.** The decision is yours to make—choose a VSP provider or any out-of-network provider. To find a VSP provider, visit 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.

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

Best Eye Care

You'll get the highest level of care, including a WellVision Exam®—the most comprehensive exam designed to detect eye and health conditions. Plus, when you see a VSP provider, 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®, Calvin Klein, Cole Haan, Flexon®, Lacoste, Nike, Nine West, and more¹. Visit vsp.com to find a Premier Program location that carries these brands. Prefer to shop online? Check out all of the brands at Eyeconic.com, VSP's online eyewear store.

Plan Information

VSP Coverage Effective Date: 01/01/2017

VSP Provider Network: VSP Signature

Visit vsp.com or call **800.877.7195** for more details on your vision coverage and exclusive savings and promotions for VSP members.

¹Brands/Promotion subject to change.

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Benefit	Description	Copay
Your Coverage with a VSP Provider		
WellVision Exam	<ul style="list-style-type: none">• Focuses on your eyes and overall wellness• Every 12 months	\$10 for exam and glasses
Prescription Glasses		
Frame	<ul style="list-style-type: none">• \$150 allowance for a wide selection of frames• \$170 allowance for featured frame brands• 20% savings on the amount over your allowance• Every 24 months	Combined with exam
Lenses	<ul style="list-style-type: none">• Single vision, lined bifocal, and lined trifocal lenses• Polycarbonate lenses for dependent children• Every 12 months	Combined with exam
Lens Enhancements	<ul style="list-style-type: none">• Tints/Photochromic adaptive lenses• Standard progressive lenses• Premium progressive lenses• Custom progressive lenses• Average savings of 35-40% on other lens enhancements• Every 12 months	\$0 \$50 \$80 - \$90 \$120 - \$160
Contacts (instead of glasses)	<ul style="list-style-type: none">• \$120 allowance for contacts; copay does not apply• Contact lens exam (fitting and evaluation)• Every 12 months	Up to \$60
Diabetic Eyecare Plus Program	<ul style="list-style-type: none">• 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.• As needed	\$20
Extra Savings	Glasses and Sunglasses <ul style="list-style-type: none">• Extra \$20 to spend on featured frame brands. Go to vsp.com/specialoffers for details.• 30% savings on additional glasses and sunglasses, including lens enhancements, from the same VSP provider on the same day as your WellVision Exam. Or get 20% from any VSP provider within 12 months of your last WellVision Exam.	
	Retinal Screening <ul style="list-style-type: none">• No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam	
	Laser Vision Correction <ul style="list-style-type: none">• Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities• After surgery, use your frame allowance (if eligible) for sunglasses from any VSP doctor	
Your Coverage with Out-of-Network Providers		
Visit vsp.com for details, if you plan to see a provider other than a VSP network provider.		
Exam	up to \$50	Lined Trifocal Lenses up to \$100
Frame	up to \$70	Progressive Lenses up to \$75
Single Vision Lenses	up to \$50	Contacts up to \$105
Lined Bifocal Lenses	up to \$75	
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.		