



## BENEFITS SUMMARY

# VSP Choice Plan #2



**Choice Network:** 31,000 preferred providers | 57,000 access points

EXAM EVERY	12 months
LENSES EVERY	12 months
FRAMES EVERY	12 months
CONTACTS (IN LIEU OF GLASSES)	12 months

### COPAYMENTS

EXAM	\$10
MATERIALS	\$10
CONTACT LENS FITTING & EVALUATION	15% discount (not to exceed \$60)

### IN NETWORK ALLOWANCES

RETAIL FRAM VALUE 1,2,3	\$150 / 20% off overage
ELECTIVE CONTACT LENSES	\$150
COVERED LENS OPTIONS	Low Vision & Polycarbonate for Children



QUESTIONS?  
800.877.7195

OUT-OF-NETWORK REIMBURSEMENT CLAIMS  
PO BOX 385017, Birmingham, AL 35238-5018



## VALUE ADDED PROGRAMS

DIABETIC EYECARE PLUS PROGRAM	Included
HEARING AID DISCOUNTS	Included
EYE HEALTH MANAGEMENT	Included
DIABETIC EXAM REMINDER LETTERS	Included

## OUT-OF-NETWORK ALLOWANCES

EXAMINATION, up to	\$45
SINGLE VISION LENSES, up to	\$30
BIFOCAL LENSES, up to	\$50
TRIFOCAL LENSES, up to	\$65
LENTICULAR LENSES, up to	\$100
FRAMES, up to	\$70
ELECTIVE CONTACT LENSES, up to	\$105
NECESSARY CONTACT LENSES, up to	\$210

## EXTRA DISCOUNTS & SAVINGS

LENS ENHANCEMENTS	Most popular are covered with a copay, saving an average 20-25%
ADDITIONAL PAIR OF GLASSES	20% off
SUNGLASSES	20% off
LASER VISION CORRECTION (LVC)	15% discount avg.



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