



Your Vision Benefit Summary

Keep your eyes healthy with Shasta-Trinity Schools Insurance Group 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 or call **800.877.7195**.
- **Review your benefit information.** Visit 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.

Diabetic EyeCare

Annual eye exams can help prevent diabetes-related blindness. If you have type 1 or type 2 diabetes, you can get both your routine and diabetic eyecare from your VSP doctor—the one who knows your eyes best. Ask your VSP doctor for details.

Choice in Eyewear

From classic styles to the latest designer frames, you'll find hundreds of options for you and your family. You'll have access to great brands, like bebe®, Calvin Klein, Disney, FENDI, Nike, and Tommy Bahama®.

Plan Information

VSP Coverage Effective Date: 01/01/2014

VSP Doctor Network: VSP Choice

Plan: A1

Benefit	Description	Copay
Your Coverage with a VSP Doctor		
WellVision Exam	<ul style="list-style-type: none"> • Focuses on your eyes and overall wellness • Every 12 months 	\$0
Prescription Glasses		
Frame	<ul style="list-style-type: none"> • \$150 allowance for a wide selection of frames • 20% off amount over your allowance • Every 24 months 	\$0
Lenses	<ul style="list-style-type: none"> • Single vision, lined bifocal, and lined trifocal lenses • Polycarbonate lenses for dependent children • Every 24 months 	\$0
Lens Options	<ul style="list-style-type: none"> • Standard progressive lenses • Premium progressive lenses • Custom progressive lenses • Average 20-25% off other lens options • Every 24 months 	\$55 \$95 - \$105 \$150 - \$175
Contacts (instead of glasses)	<ul style="list-style-type: none"> • \$150 allowance for contacts and contact lens exam (fitting and evaluation) • 15% off contact lens exam (fitting and evaluation) • Every 24 months 	\$0
Additional Coverage	<ul style="list-style-type: none"> • Diabetic Eyecare Plus Program 	
Extra Savings and Discounts	<p>Glasses and Sunglasses</p> <ul style="list-style-type: none"> • 20% off additional glasses and sunglasses, including lens options, from any VSP doctor within 12 months of your last WellVision Exam. <p>Laser Vision Correction</p> <ul style="list-style-type: none"> • Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities 	
Your Coverage with Other Providers		
Visit vsp.com for details, if you plan to see a provider other than a VSP doctor.		
Exam.....	up to \$45	Lined Trifocal Lenses..... up to \$65
Frame.....	up to \$70	Progressive Lenses..... up to \$50
Single Vision Lenses.....	up to \$30	Contacts..... up to \$105
Lined Bifocal Lenses.....	up to \$50	
<small>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.</small>		

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

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