

LIFE IS BETTER IN FOCUS™



Enroll in VSP® Vision Care

2019 Federal Employees Dental and
Vision Insurance Program (FEDVIP)



choosevsp.com
800.807.0764



We've got your vision covered.

You and your eyes deserve to be healthy and happy. That's where we come in. With VSP, you'll get access to the quality eye care you deserve from a doctor you'll love. Personalized care at low out-of-pocket costs and stylish eyewear you want—it's a win-win!

Choices you want.

With an average of five VSP network doctors within five miles of you, it's easy to find a nearby in-network doctor to get more out of your vision coverage. High Option members can save over **\$569*** on essentials—like an eye exam and eyewear—when they visit one of our more than **34,000** in-network doctors.

Styles you'll love.

Find frames for the whole family with hundreds of stylish options. Plus, you'll get a higher frame allowance when you choose a featured frame brand.

- ▶ Visit choosevsp.com to find a doctor who participates in the **Premier Program** and carries a wide selection of featured frame brands.



Featured Frame Brands, plus many more¹

bebe

CALVIN KLEIN

COLE HAAN

Flexon
EYEWEAR

LACOSTE



NINE WEST
EYEWEAR

Options you expect.

Prefer to shop online? Get contacts, glasses, and sunglasses using your vision benefits on Eyeconic®—the VSP preferred online retailer.

- ▶ Find **Eyeconic** on choosevsp.com.



Savings you deserve.

Maximize your savings with the VSP High Option plan.

Exam/Eyewear	Without VSP*	With VSP High Option
Eye Exam	\$171	\$10 Copay
Frame (\$200 allowance**)	\$200	
Single Vision Lenses	\$96	\$0
TechShield (Anti-reflective Coating)	\$115	
Shatter-resistant Lenses (Polycarbonate)	\$58	
Photochromic Adaptive Lenses	\$113	\$0
Self-only Annual Premium (Pre-tax for employees)	\$0	
Total Cost for Services	\$753	\$183.16

1. Brands subject to change.

*Comparison based on national average for comprehensive eye exams and most commonly purchased brands. Out-of-network reimbursements vary.

**Enjoy a higher frame allowance when you purchase a featured frame brand. VSP High Option plan comes with a \$150 frame allowance toward the purchase of any frame brand; or get a \$200 frame allowance on a featured frame brand.

Average annual savings*
(Family savings will be higher.)

\$569.84

Don't miss your chance. Enroll today!

Enroll in VSP at BENEFEDS.com or call **877.888.FEDS (3337)** from **November 12 - December 10, 2018 (EST)**. Choose the Standard Option, or select the High Option for enhanced benefits. Plus, you can enroll in VSP no matter which medical plan you choose. We'll coordinate with your medical or other vision coverage so you get the most from your benefit.

		Standard Option	High Option	
Your Coverage with a VSP Provider				
		Copay		Copay
WellVision Exam	<ul style="list-style-type: none"> Focuses on your eyes and overall wellness Every calendar year 	\$10	<ul style="list-style-type: none"> Focuses on your eyes and overall wellness Every calendar year 	
Frame	<ul style="list-style-type: none"> \$160 allowance on featured frame brands \$120 allowance on a wide selection of frames 20% savings on the amount over your allowance Every calendar year 	\$20	<ul style="list-style-type: none"> \$200 allowance on featured frame brands \$150 allowance on a wide selection of frames 20% savings on the amount over your allowance Every calendar year 	\$10 for exam or glasses
Lenses	<ul style="list-style-type: none"> Single vision, lined bifocal, lined trifocal, and lenticular lenses Every calendar year 		<ul style="list-style-type: none"> Single vision, lined bifocal, lined trifocal, and lenticular lenses Every calendar year 	
Progressive Lenses	<ul style="list-style-type: none"> Standard progressive lenses Premium progressive lenses Custom progressive lenses 	\$0 \$95-\$105 \$150-\$175	<ul style="list-style-type: none"> Standard progressive lenses Premium progressive lenses Custom progressive lenses 	\$0 \$95-\$105 \$150-\$175
Anti-reflective	<ul style="list-style-type: none"> Standard anti-reflective coating Premium anti-reflective coating Ultra-premium anti-reflective coating Custom anti-reflective coating 	\$41 \$58 \$69 \$85	<ul style="list-style-type: none"> Standard anti-reflective coating Premium anti-reflective coating Ultra-premium anti-reflective coating Custom anti-reflective coating All TechShield™ anti-reflective coatings 	\$21 \$38 \$49 \$65 \$0
Other Lens Enhancements	<ul style="list-style-type: none"> Scratch-resistant coating Polycarbonate (children and adults) Solid tints Photochromic adaptive lenses UV coating Average 20-25% savings on other lens enhancements 	\$0 \$0 \$15 \$70-\$82 \$16	<ul style="list-style-type: none"> Scratch-resistant coating Polycarbonate (children and adults) Solid tints Photochromic adaptive lenses UV coating Average 20-25% savings on other lens enhancements 	\$0 \$0 \$0 \$0 \$0
Contacts (versus glasses)	<ul style="list-style-type: none"> \$120 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation) Every calendar year 	Up to \$55	<ul style="list-style-type: none"> \$150 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation) Every calendar year 	Up to \$55

Premiums				
	Bi-weekly	Monthly	Bi-weekly	Monthly
Self Only	\$3.52	\$7.63	\$6.66	\$14.43
Self + One	\$7.03	\$15.23	\$13.34	\$28.90
Self + Family	\$10.56	\$22.88	\$20.02	\$43.38

Extra Savings	
<p>Glasses and Sunglasses</p> <ul style="list-style-type: none"> 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP provider 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. <p>Contacts</p> <ul style="list-style-type: none"> 15% savings on a contact lens exam from any VSP provider. 	<p>Retinal Screening</p> <ul style="list-style-type: none"> No more than a \$39 copay on routine retinal screening as an enhancement to your WellVision Exam. <p>Out-of-Network</p> <ul style="list-style-type: none"> Get the most out of your benefits and greater savings with a VSP network doctor or when you use your benefits on Eyeconic. Call Member Services at 800.807.0764 for out-of-network plan details.

VSP guarantees service from VSP providers only. 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.

▶ = Take advantage of these benefits to maximize your savings.

NEW FOR 2019: Military families and retirees can access VSP.

FEDVIP will be offered to eligible TRICARE members for 2019 coverage. Certain retired members of the uniformed services, their families, and family members of active duty service men and women can enroll in VSP Vision Care during the Federal benefits enrollment period, **Open Season, November 12 - December 10, 2018 (EST)**. Choose VSP to stay healthy, save money, and look great.



Visit choosevsp.com/TRICARE to learn more about VSP and find out if you're eligible to enroll.

Contact us.

Still on the fence? Visit choosevsp.com to see why you should enroll and find out which VSP plan option is best for you and your family.

Questions? Call 800.807.0764.

