

Get the best in eyecare and eyewear with CAMPBELL COUNTY SCHOOL DISTRICT #1 and VSP® Vision Care.

Why enroll in VSP? We invest in the things you value most—the best care at the lowest out-of-pocket costs. Because we're the only national not-for-profit vision care company, you can trust that we'll always put your wellness first.

You'll like what you see with VSP.

- High Quality Vision Care. You'll get the best care from a VSP provider including a WellVision Exam®—the most comprehensive exam designed to detect eye and health conditions.
- Choice of Providers. The decision is yours to make—choose a VSP doctor, a participating retail chain, or any out-of-network provider.
- Great Eyewear. It's easy to find the perfect frame at a price that fits your budget.

Save with VSP coverage:	Without VSP Coverage	With VSP Coverage	
Eye Exam	\$154	\$10 Copay	
Frame	\$130	#1E Conov	
Single Vision Lenses	\$86	\$15 Copay	
Photochromic Adaptive Lenses	\$103	\$70	
Anti-reflective Coating	\$110	\$69	
Member-only Annual Contribution	N/A	\$132	
Total	\$583	\$296	

*Comparison based on national averages for comprehensive eye exams and most commonly purchased brands

NOTE: Dollar amounts in the savings chart are estimates and don't reflect additional discounts from current VSP offers and promotions.

Average Annual Savings \$287 with a

Using your VSP benefit is easy.

- Register at vsp.com. Once your plan is effective, review your benefit information.
- Find an eyecare provider who's right for you. 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.

Choice in Eyewear

From classic styles to the latest designer frames, you'll find hundreds of options. Choose from featured frame brands like Anne Klein, bebe®, Calvin Klein, Flexon®, Lacoste, Nike, Nine West, and more! Visit **vsp.com** to find a VSP provider who carries these brands.



Enroll in VSP today. You'll be glad you did. Contact us. 800.877.7195
vsp.com

Your VSP Vision Benefits Summary

CAMPBELL COUNTY SCHOOL DISTRICT #1 and VSP provide you with an affordable eyecare plan.

VSP Coverage Effective Date: 07/01/2015 VSP Provider Network: VSP Choice Visit **vsp.com** for more details on your vision benefit and for exclusive savings and promotions for VSP members.

Benefit	Description	Copay	Frequency		
Your Coverage with a VSP Provider					
WellVision Exam	Focuses on your eyes and overall wellness	\$10	Every 12 months		
Prescription Glasses		\$15	See frame and lenses		
Frame	 \$175 allowance for a wide selection of frames \$195 allowance for featured frame brands \$95 allowance at Costco 20% savings on the amount over your allowance 	Included in Prescription Glasses	Every 24 months		
Lenses	 Single vision, lined bifocal, and lined trifocal lenses Polycarbonate lenses for dependent children 	Included in Prescription Glasses	Every 12 months		
Lens Enhancements	Standard progressive lenses Premium progressive lenses Custom progressive lenses Average savings of 20-25% on other lens enhancements	\$55 \$95 - \$105 \$150 - \$175	Every 12 months		
Contacts (instead of glasses)	 \$175 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation) 	Up to \$60	Every 12 months		
Diabetic Eyecare Plus Program	 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. 	\$20	As needed		
Classes and Sunglasses Extra \$20 to spend on featured frame brands. Go to vsp.com/specialoffers for details. 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP provider within 12 months of your last WellVision Exam. Laser Vision Correction					
	Average 15% off the regular price or 5% off the promotional price; dis	counts only availa	bie irom contracted facilitie		

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.						
Examup to \$45 Frameup to \$70	Single Vision Lensesup to \$30 Lined Bifocal Lensesup to \$50	Lined Trifocal Lensesup to \$65 Progressive Lensesup to \$50	Contactsup to \$105			

Coverage with a participating retail chain may be different. Once your benefit is effective, visit vsp.com for details.

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.