

## Individual & Family Plans VSP Vision Option for Adults

## Keep your eyes healthy with CHINESE COMMUNITY HEALTH PLAN and VSP<sup>®</sup> 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.

#### **Personalized Care**

A VSP doctor provides personalized care that focuses on keeping you and your eyes healthy year after year. Plus, when you see a VSP doctor, 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 for you and your family. You'll have access to great brands, like bebe<sup>®</sup>, Calvin Klein, FENDI, Nike, and Tommy Bahama<sup>®</sup>.



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

## VSP Benefit Summary

Benefit	ur Coverage with a VSP Doctor Description	Сорау		
WellVision Exam®	<ul> <li>Focuses on your eyes and overall wellness</li> <li>Every 12 months</li> </ul>	\$10		
Prescription Glasses		\$25		
Frame	<ul> <li>\$130 allowance for a wide selection of frames</li> <li>20% on the amount over your allowance</li> <li>Every 24 months</li> </ul>	Combined with exam		
Lenses	<ul> <li>Single vision, lined bifocal, and lined trifocal lenses</li> <li>Polycarbonate lenses for dependent children</li> <li>Every 12 months</li> </ul>	Combinec with exam		
	Standard progressive lenses	\$55		
	Premium progressive lenses	\$95 - \$105		
	Polycarbonate (adult-single vision)	\$31		
	Polycarbonate (adult-multifocal)	\$35		
Lens	Photochromic (adult-single vision)	\$47		
Enhancements	Photochromic (adult-multifocal)	\$70		
	Anti-reflective coating	\$43		
	Scratch-resistant coating	\$17		
	UV Coating	\$0		
	Tint (solid and gradient)	\$15 - \$17		
	Every 12 months			
Contacts (instead of glasses)	<ul> <li>\$130 allowance for contacts and contact</li> <li>lens exam (fitting and evaluation) 15% off contact lens exam (fitting and evaluation)</li> <li>Every 12 months</li> </ul>			
Extra	<ul> <li>Glasses and Sunglasses</li> <li>20% on the amount over your allowance on additional glasses and sunglasses, including lens, from any VSP doctor within 12 months of your last WellVision Exam.</li> </ul>			
Savings	<ul> <li>Laser Vision Correction</li> <li>Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities.</li> </ul>			
Your Coverage with Other Providers				
Visit vsp.com for details, if you plan to see a provider other than a VSP doctor				

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.

Single Vision Lenses .....up to \$30

Lined Bifocal Lenses .....up to \$50

Contacts .....up to \$100

CCHP members already receive coverage for pediatric vision benefits through CCHP's medical plan. The purchase of the vision rider provides an additional benefit for adult vision.

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## Vision Coverage for Children Through Chinese Community Health Plan and VSP

Your child is covered-in-full for an eye exam and glasses or contacts every year.

Your child's eyes deserve the best care to keep them healthy year after year. Plus, with VSP, you'll get a great value on eyecare and eyewear for your child.

#### You'll like what you see with VSP.

- Find a VSP doctor who's right for your child. To find a VSP doctor, visit vsp.com.
- Review your child's benefit information. Visit vsp.com to review your child's plan coverage before an appointment.
- At the appointment, tell them your child has VSP.

That's it! We'll handle the rest—there are no claim forms to complete when your child sees a VSP doctor.

## Eye Exams for Children

80% of what we learn is through our eyes. Many states require that children get a comprehensive eye exam before Kindergarten. Schedule an eye exam for your child at the beginning of every school year and start the year off right. Visit **vsp.com** to find a VSP doctor that specializes in child eyecare.



Visit **vsp.com** for more details on your child's vision benefit and the exclusive savings and promotions for VSP members.

Contact us. vsp.com | 855.868.4561

# Individual & Family Plans Pediatric Vision Plan Summary

(Included in Plan)

#### **VSP Benefit Summary**

Taking care of your child's eyes with VSP includes a covered-in-full benefit with no cost to you. You'll have access to the highest quality vision care from a VSP doctor you can trust. Visit **vsp.com/advantage** to find a doctor who's right for your child and one who carries children's frames from our exclusive Otis & Piper<sup>™</sup> Eyewear Collection.

Doctor Network - VSP Advantage					
Your Coverage with a VSP Doctor					
Benefit	Description	Copay	Frequency		
WellVision Exam®	<ul> <li>A thorough eye exam that tests for childhood eye health and vision issues, like nearsightedness, amblyopia (lazy eye), and strabismus.</li> </ul>	\$0	Every 12 months		
Prescription Glasses					
Frame	<ul> <li>Frames from our exclusive Otis &amp; Piper Eyewear Collection</li> </ul>	\$0	Every 12 months		
Lenses	<ul> <li>Single vision, lined bifocal, lined trifocal, or lenticular lenses</li> </ul>	\$0	Every 12 months		
Lens Options	<ul> <li>Polycarbonate, scratch- resistant coating, and UV protection</li> <li>20% - 25% off other lens options</li> </ul>	\$0	Every 12 months		
Contacts (instead of glasses)	<ul> <li>Contact lens exam and a minimum three-month's supply of contact lenses are covered in full. Ask your VSP doctor which contacts qualify for your child's plan.</li> </ul>	\$0	Every 12 months		
Extra Savings And DiscountsGlasses and Sunglasses • 20% off additional glasses and sunglasses, including lens options, from any VSP doctor within 12 months of your last WellVision Exam.Laser Vision Correction • Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities.					
VSP guarantees coverage from VSP doctors only. Coverage information is subject to change.					

Once your child's benefit is effective, visit vsp.com for details. Coverage information is subject to change. In the event of a conflict between this information and the applicable contract, the terms of the contract will prevail.

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# Individual & Family Plans Pediatric Vision Plan Summary

(Included in Plan) (for Minimum Coverage HMO Plan)

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Doctor Network - VSP Advantage					
Your Coverage with a VSP Doctor					
Benefit	Description	Сорау	Frequency		
WellVision Exam®	<ul> <li>A thorough eye exam that tests for childhood eye health and vision issues, like nearsightedness, amblyopia (lazy eye), and strabismus.</li> </ul>	0% Coinsurance After Deductible*	Every 12 months		
Prescription	Glasses				
Frame	Frames from our exclusive Otis & Piper Eyewear Collection	0% Coinsurance After Deductible*	Every 12 months		
Lenses	<ul> <li>Single vision, lined bifocal, lined trifocal, or lenticular lenses</li> </ul>	0% Coinsurance After Deductible*	Every 12 months		
Lens Options	<ul> <li>Polycarbonate, scratch- resistant coating, and UV protection</li> <li>20% - 25% off other lens options</li> </ul>	0% Coinsurance After Deductible*	Every 12 months		
Contacts (instead of glasses)	<ul> <li>Contact lens exam and a minimum three-month's supply of contact lenses are covered in full. Ask your VSP doctor which contacts qualify for your child's plan.</li> </ul>	0% Coinsurance After Deductible*	Every 12 months		
Extra       Glasses and Sunglasses         Savings       20% off additional glasses and sunglasses, including lens options, from any VSP doctor within 12 months of your last WellVision Exam.         And       Laser Vision Correction         Oiscounts       • Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities.					
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**Footnote:** \*Annual deductible is \$7,350 per individual and \$14,700 per family. Member is responsible for 100% of cost of service prior to meeting the deductible.

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