

Get access to the best in eye care and eyewear with OMNITRADE HEALTH TRUST - PLAN B W/SAFETY and VSP[®] Vision Care.

As a VSP member, you have access to care from great eye doctors, quality eyewear, and the affordability you deserve, all at low out-of-pocket costs.

You'll like what you see with VSP.

- Value and Savings. You'll enjoy more value and low out-of-pocket costs.
- High Quality Vision Care. You'll get great care from a VSP network doctor, including a WellVision Exam[®]—a comprehensive exam designed to detect eye and health conditions.
- Choice of Providers. The decision is yours to make—with the largest national network of private-practice doctors, plus participating retail chains, it's easy to find the in-network doctor who's right for you.
- Great Eyewear. It's easy to find the perfect frame at a price that fits your budget.

Using your VSP benefit is easy.

- Create an account at vsp.com. Once your plan is effective, review your benefit information.
- Find an eye doctor who's right for you. 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 bebe, CALVIN KLEIN, Cole Haan, Flexon[®], Lacoste, Nike, Nine West, and more.¹ Visit **vsp.com** to find a Premier Program location that carries these brands. Plus, save up to 40% on popular lens enhancements.² Prefer to shop online? Check out all of the brands at **eyeconic.com**[®], VSP's preferred online eyewear store.

See why we're consumers' #1 choice in vision care³.

Contact us. 800.877.7195 vsp.com



Your VSP Vision Benefits Summary

OMNITRADE HEALTH TRUST - PLAN B W/SAFETY and VSP provide you with an affordable eyecare plan.

VSP Coverage Effective Date: 01/01/2019

VSP Provider Network: VSP Choice

Benefit	Description	Copay	Frequency
	Your Coverage with a VSP Provider		
WellVision Exam	Focuses on your eyes and overall wellness	\$25 for exam and glasses	Every 12 months
Prescription Glasses			
Frame	 \$180 allowance for a wide selection of frames \$200 allowance for featured frame brands 20% savings on the amount over your allowance \$100 Costco[®] frame allowance 	Combined with exam	Every 24 months
Lenses	 Single vision, lined bifocal, and lined trifocal lenses Polycarbonate lenses for dependent children 	Combined with exam	Every 12 months
Lens Enhancements	 Standard progressive lenses Premium progressive lenses Custom progressive lenses Average savings of 20-25% on other lens enhancements 	\$0 \$95 - \$105 \$150 - \$175	Every 12 months
Contacts (instead of glasses)	 \$180 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
Safety Glasses (Employe	e-only coverage)		
Safety Eye Exam	Exam to determine safety eyewear needs	\$0	Every 12 months
Frame	 \$65 allowance for a safety frame 20% savings on the amount over your allowance Certified according to the American National Standards Institute (ANSI) guidelines for impact protection 	\$O	Every 24 months
Lenses	 Prescription single vision, lined bifocal, and lined trifocal Certified according to the American National Standards Institute (ANSI) guidelines for impact protection 	\$O	Every 12 months
Extra Savings	 Glasses 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. 		
	 Retinal Screening No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam 		
	Laser Vision Correction Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities 		
	Your Coverage with Out-of-Network Providers		
et the most out of your be	enefits and greater savings with a VSP network doctor. Call Member Servic	es for out-of-networ	k plan details.
xam rame			up to \$1

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

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. In the state of Washington, VSP Vision Care, Inc., is the legal name of the corporation through which VSP does business.

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1. Brands/Promotion subject to change.

2. Savings based on network doctor's retail price and vary by plan and purchase selection; average savings determined after benefits are applied. Available only through VSP network doctors to VSP members with applicable plan benefits. Ask your VSP network doctor for details. 3. 2017 National Vision Plan Member Research.

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