

A Look at Your VSP Vision Coverage

With VSP and GOODWIN PROCTER LLP,
your health comes first.



VSP® Vision Care provides you personalized eye care at VSP network locations with low or no out-of-pocket costs.

Value and savings you love.

Save on eyewear and eye care when you see a VSP network doctor. Plus, take advantage of Exclusive Member Extras which provide offers from VSP and leading industry brands totaling more than \$3,000 in savings.

Provider choices you want.

Maximize your coverage with bonus offers and out-of-pocket savings that are exclusive to Premier Program locations, including thousands of private practice doctors and over 700 Visionworks® retail locations nationwide.

	Preferred private practice and retail in-network choices
	 

Quality vision care you need.

You'll get great care from a VSP network doctor, including a WellVision Exam®. An annual eye exam not only helps you see well, but helps a doctor detect signs of eye conditions and health conditions, like diabetes and high blood pressure.

Using your benefit is easy!

Create an account on vsp.com to view your in-network coverage, find the VSP network doctor who's right for you, and discover savings with Exclusive Member Extras. At your appointment, just tell them you have VSP.

vsp
vision care

More Ways
to Save

Extra
\$20
to spend on
Featured Frame Brands†

bebe CALVIN KLEIN
COLE HAAN DRAGON
FLEXON LACOSTE
and more

See all brands and offers
at vsp.com/offers.

+
Up to
40%
Savings on
lens enhancements‡

Contact us: **800.877.7195** or vsp.com

Your VSP Vision Benefits Summary

GOODWIN PROCTER LLP and VSP provide you with an affordable vision plan to maximize your coverage. Get the most out of your benefits with low, or no out-of-pocket costs when you visit a VSP network doctor or Premier Program location.

Provider Network:

VSP Choice

Effective Date:

01/01/2025



BENEFIT	DESCRIPTION	IN-NETWORK	OUT-OF-NETWORK
WELLVISION EXAM	<ul style="list-style-type: none"> Focuses on your eyes and overall wellness Routine retinal screening 	\$15 copay	
RETINAL SCREENING	<ul style="list-style-type: none"> Images of the inside of the eye, used to screen for potential signs of eye disease Every calendar year 	Up to \$39 copay	Up to \$45 reimbursement, after \$15 copay
ESSENTIAL MEDICAL EYE CARE	<ul style="list-style-type: none"> Retinal imaging for members with diabetes covered-in-full Additional exams and services beyond routine care to treat immediate issues from pink eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more. Coordination with your medical coverage may apply. Ask your VSP network doctor for details. Available as needed 	\$0 copay per screening \$20 copay per exam	Reimbursed up to 80%, after \$20 copay
PRESCRIPTION GLASSES		\$0	\$0
FRAME[†]	<ul style="list-style-type: none"> \$220 Featured Frame Brands allowance \$200 frame allowance 20% savings on the amount over your allowance \$200 Walmart[®]/Sam's Club[®] frame allowance \$110 Costco[®] frame allowance Every other calendar year 	Included in Prescription Glasses	Up to \$70 reimbursement
LENSES	<ul style="list-style-type: none"> Single vision lenses Lined bifocal lenses Lined trifocal lenses Every calendar year 	Included in Prescription Glasses	Up to \$30 reimbursement Up to \$50 reimbursement Up to \$65 reimbursement
LENS ENHANCEMENTS	<ul style="list-style-type: none"> Impact-resistant lenses Standard progressive lenses Premium/Custom progressive lenses Average savings of 30% on other lens enhancements Every calendar year 	\$0 \$0 \$95 - \$175	N/A Up to \$50 reimbursement for progressive lenses only N/A
CONTACTS (INSTEAD OF GLASSES)	<ul style="list-style-type: none"> \$200 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation) Every calendar year 	Up to \$60	Up to \$105 reimbursement, including the contact lens exam
REPAIR/REPLACEMENT	<ul style="list-style-type: none"> Frame - Repair or replacement of a frame if damaged or broken. A frame will only be replaced if the cost of repairing it exceeds the cost of a replacement. A replacement frame will be covered up to your frame allowance. Every other calendar year Lenses - Repair or replacement of your standard lenses if they are damaged or broken. Every calendar year 	Included in Prescription Glasses	N/A
AVAILABLE THROUGH VSP PRIVATE PRACTICE PROVIDERS ONLY			
ADDITIONAL SAVINGS	<p>Glasses and Sunglasses</p> <ul style="list-style-type: none"> Extra \$20 to spend on featured frame brands. Go to vsp.com/offers for details. 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP provider within 12 months of your last WellVision Exam. <hr/> <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. 		

[†]Only available to VSP members with applicable plan benefits. Frame brands and promotions are subject to change.

[‡]Savings based on doctor's retail price and vary by plan and purchase selection; average savings determined after benefits are applied. Ask your VSP network doctor for more details.

*Coverage with a retail chain may be different or not apply.

VSP guarantees member satisfaction from VSP providers 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. 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. TruHearing is not available directly from VSP in the states of California and Washington.

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