

Your VSP Vision Benefits Summary

HENDRIX COLLEGE and VSP provide you with an affordable eyecare plan.

VSP Coverage Effective Date: 01/01/2012
VSP Doctor Network: VSP Signature

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 Doctor			
WellVision Exam	• Focuses on your eyes and overall wellness	\$10	Every 12 months
Prescription Glasses		\$25	See frame and lenses
Frame	• \$130 allowance for a wide selection of frames • 20% off 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 Options	• Standard progressive lenses • Premium progressive lenses • Custom progressive lenses • Average 35-40% off other lens options	\$50 \$80 - \$90 \$120 - \$160	Every 12 months
Contacts (instead of glasses)	• \$130 allowance for contacts and contact lens exam (fitting and evaluation) • 15% off contact lens exam (fitting and evaluation)	\$0	Every 12 months
Extra Savings and Discounts	Glasses and Sunglasses • 30% off additional glasses and sunglasses, including lens options, from the same VSP doctor on the same day as your WellVision Exam. Or get 20% off from any VSP doctor within 12 months of your last WellVision Exam.		
	Retinal Screening • Guaranteed pricing on retinal screening as an enhancement to your WellVision Exam.		
	Laser Vision Correction • Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities • After surgery, use your frame allowance (if eligible) for sunglasses from any VSP doctor		
Your Monthly Contribution	\$8.48 Employee only \$13.57 Employee + 1 \$13.85 Employee + children \$22.34 Employee + family		

Your Coverage with Other Providers

Visit vsp.com for details, if you plan to see a provider other than a VSP doctor.

Exam..... up to \$50	Single Vision Lenses..... up to \$50	Lined Trifocal Lenses..... up to \$100	Contacts..... up to \$105
Frame..... up to \$70	Lined Bifocal Lenses..... up to \$75	Progressive Lenses..... up to \$75	

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.

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

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