



Protect  
your vision  
with VSP.

## Get the best in eye care and eyewear with OHIO WESLEYAN UNIVERSITY 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.

- **Value and Savings.** You'll enjoy more value and the lowest out-of-pocket costs.
- **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. Plus, when you see a VSP provider, your satisfaction is guaranteed.
- **Choice of Providers.** The decision is yours to make—choose a VSP provider or any out-of-network provider.
- **Great Eyewear.** It's easy to find the perfect frame at a price that fits your budget.

Enroll in VSP today.  
You'll be glad you did.  
Contact us. **800.877.7195**  
[vsp.com](https://www.vsp.com)

### Using your VSP benefit is easy.

- **Register at [vsp.com](https://www.vsp.com)** Once your plan is effective, review your benefit information.
- **Find an eye care provider who's right for you.** To find a VSP provider, visit [vsp.com](https://www.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](https://www.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 more¹. Visit [vsp.com](https://www.vsp.com) to find a VSP provider who carries these brands.

# Your VSP Vision Benefits Summary

OHIO WESLEYAN UNIVERSITY and VSP provide you with a choice of affordable vision plans – choose the plan that's right for you.

Standard VSP Provider Network: VSP Signature			Buy Up VSP Provider Network: VSP Signature		
Benefit	Description	Copay	Benefit	Description	Copay
Your Coverage with a VSP Provider			Your Coverage with a VSP Provider		
WellVision Exam	<ul style="list-style-type: none"><li>Focuses on your eyes and overall wellness</li><li>Every 12 months</li></ul>	\$20	WellVision Exam	<ul style="list-style-type: none"><li>Focuses on your eyes and overall wellness</li><li>Every 12 months</li></ul>	\$10
Prescription Glasses		\$20	Prescription Glasses		\$25
Frame	<ul style="list-style-type: none"><li>\$130 allowance for a wide selection of frames</li><li>\$150 allowance for featured frame brands</li><li>20% savings on the amount over your allowance</li><li>Every 24 months</li></ul>	Included in Prescription Glasses	Frame	<ul style="list-style-type: none"><li>\$140 allowance for a wide selection of frames</li><li>\$160 allowance for featured frame brands</li><li>20% savings on the amount over your allowance</li><li>Every 24 months</li></ul>	Included in Prescription Glasses
Lenses	<ul style="list-style-type: none"><li>Single vision, lined bifocal, and lined trifocal lenses</li><li>Polycarbonate lenses for dependent children</li><li>Every 24 months</li></ul>	Included in Prescription Glasses	Lenses	<ul style="list-style-type: none"><li>Single vision, lined bifocal, and lined trifocal lenses</li><li>Polycarbonate lenses for dependent children</li><li>Every 12 months</li></ul>	Included in Prescription Glasses
Lens Enhancements	<ul style="list-style-type: none"><li>Standard progressive lenses</li><li>Premium progressive lenses</li><li>Custom progressive lenses</li><li>Average savings of 35-40% on other lens enhancements</li><li>Every 24 months</li></ul>	\$50 \$80 - \$90 \$120 - \$160	Lens Enhancements	<ul style="list-style-type: none"><li>Progressive lenses</li><li>Average savings of 35-40% on other lens enhancements</li><li>Every 12 months</li></ul>	\$0
Contacts (instead of glasses)	<ul style="list-style-type: none"><li>\$130 allowance for contacts; copay does not apply</li><li>Contact lens exam (fitting and evaluation)</li><li>Every 24 months</li></ul>	Up to \$60	Contacts (instead of glasses)	<ul style="list-style-type: none"><li>\$140 allowance for contacts; copay does not apply</li><li>Contact lens exam (fitting and evaluation)</li><li>Every 12 months</li></ul>	Up to \$60
Diabetic Eyecare Program	<ul style="list-style-type: none"><li>Services related to type 1 diabetes. Limitations and coordination with medical coverage may apply. Ask your VSP doctor for details.</li><li>As needed</li></ul>	\$5	Diabetic Eyecare Program	<ul style="list-style-type: none"><li>Services related to type 1 diabetes. Limitations and coordination with medical coverage may apply. Ask your VSP doctor for details.</li><li>As needed</li></ul>	\$5
Extra Savings	<b>Glasses and Sunglasses</b> <ul style="list-style-type: none"><li>Extra \$20 to spend on featured frame brands. Go to <a href="http://vsp.com/specialoffers">vsp.com/specialoffers</a> for details.</li><li>30% savings on additional glasses and sunglasses, including lens enhancements, from the same VSP provider on the same day as your WellVision Exam. Or get 20% from any VSP provider within 12 months of your last WellVision Exam.</li></ul>				
	<b>Retinal Screening</b> <ul style="list-style-type: none"><li>No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam</li></ul>				
	<b>Laser Vision Correction</b> <ul style="list-style-type: none"><li>Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities</li><li>After surgery, use your frame allowance (if eligible) for sunglasses from any VSP doctor</li></ul>				
Your Coverage with Out-of-Network Providers					
Visit <a href="http://vsp.com">vsp.com</a> for details, if you plan to see a provider other than a VSP network provider.					
Exam ..... up to \$35		Lined Bifocal Lenses ..... up to \$40		Progressive Lenses ..... up to \$55	
Frame ..... up to \$45		Lined Trifocal Lenses ..... up to \$55		Contacts ..... up to \$105	
Single Vision Lenses ..... up to \$25					

VSP guarantees coverage from VSP network 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.

<sup>1</sup>Brands/Promotion subject to change.

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