

ENROLL IN VSP® VISION CARE



choosevsp.com
800.807.0764

EYE CARE IS HEALTHCARE.

2022 Federal Employees Dental and
Vision Insurance Program (FEDVIP)

▶ LOOK INSIDE FOR NEW BENEFITS!



SEE WELL. BE WELL.®

As a VSP® member, your eye health and wellness are our number one priority. We believe your annual eye exam is a critical step in taking care of your health. Take care of your eyes by enrolling in VSP so you can focus on what's important to you!



CHOICES YOU WANT.

With an average of five VSP network doctors within six miles of you, it's easy to find a nearby in-network doctor to get more out of your vision coverage. VSP members who enroll in the Standard Option plan save an average of **\$497** and members in the High Option plan save **\$645²** when they visit one of our more than **39,000** in-network doctors. Members who visit a Premier Program location save even more!



NEW IN 2022: NO EXAM COPAYS AT PREMIER PROGRAM LOCATIONS OR VISIONWORKS.

You'll maximize your VSP benefits at Premier Program private practices and Visionworks® retail locations—including **\$0 exam copays** and a **higher frame allowance**.



YOUR EYES SHOULD COME FIRST.

Glaucoma is the second leading cause of blindness worldwide. About 3 million Americans have it, and 50% don't know.¹ Early detection can help protect your vision—one more reason to get an eye exam every year.



EYEWEAR OPTIONS YOU'LL LOVE.

Find frames for the whole family with hundreds of stylish options. Plus, you'll get a higher frame allowance when you choose a featured frame brand at a Premier Program location.

Prefer to shop online? Get contacts, glasses, and sunglasses using your vision benefits on **Eyeconic**®—the VSP preferred online retailer.



SAVINGS YOU DESERVE.

Maximize your savings with the VSP High Option plan at a Premier Program location.

FEATURED FRAME BRANDS INCLUDE

bebe

CALVIN KLEIN

COLE HAAN

DRAGON

FLEXON
EYEWEAR

LACOSTE



AND MORE!

Exam/Eyewear	Without VSP ²	With VSP High Option at Premier Program locations
Eye Exam	\$184	\$0 Copay
Frame (\$250 allowance ³)	\$250	
Single Vision Lenses	\$105	
TechShield® Anti-glare Coating	\$148	\$0
Impact-resistant Lenses	\$58	\$0
Light-reactive Lenses	\$125	\$0
Self-only Annual Premium (Pre-tax for Employees)	N/A	\$174.48
Total Cost for Services	\$870	\$174.48

1. CDC.

2. Comparison based on national average for comprehensive eye exams and most commonly purchased brands.

3. The VSP High Option plan comes with a \$200 frame allowance toward the purchase of any frame brand, or a \$250 frame allowance on featured frame brands at a Premier Program location, or a \$250 frame allowance on any frame brand at Visionworks.

AVERAGE ANNUAL SAVINGS²

\$695.52

Psst...family savings will be even higher!

YOUR EYE HEALTH MATTERS. ENROLL IN VISION COVERAGE TODAY.

Enroll at **BENEFEDS.com** or call **877.888.FEDS** (3337) from **November 8 – December 13, 2021 (EST, Midnight)**. Choose the Standard Option plan or select the High Option plan for enhanced benefits. You can enroll in VSP no matter which medical plan you choose. We'll coordinate with your medical or other vision coverage so you get the most from your VSP benefits.



► = NEW FOR 2022!

Benefit	Standard Option Plan	Copays	Benefit	High Option Plan	Copays
WellVision Exam®	<ul style="list-style-type: none"> Focuses on your eyes and overall wellness ► Fully covered at Premier Program locations, including Visionworks Every calendar year 	\$10 Or \$0 at Premier Program locations	WellVision Exam	<ul style="list-style-type: none"> Focuses on your eyes and overall wellness ► Fully covered at Premier Program locations, including Visionworks Every calendar year 	\$10 for exam and/or glasses Or \$0 for exam and/or glasses at Premier Program locations
Frames	<ul style="list-style-type: none"> ► \$200 featured frame brand allowance at Premier Program locations ► \$200 allowance on any frame at Visionworks \$150 frame allowance 20% savings on the amount over your allowance ► \$150 Walmart®/Sam's Club® allowance Every calendar year 	\$20	Frames	<ul style="list-style-type: none"> ► \$250 featured frame brand allowance at Premier Program locations ► \$250 allowance on any frame at Visionworks \$200 frame allowance 20% savings on the amount over your allowance ► \$200 Walmart/Sam's Club allowance Every calendar year 	
Lenses	<ul style="list-style-type: none"> Single vision, lined bifocal, lined trifocal, and lenticular lenses Impact-resistant lenses for dependent children Every calendar year 		Lenses	<ul style="list-style-type: none"> Single vision, lined bifocal, lined trifocal, and lenticular lenses Impact-resistant lenses for dependent children Every calendar year 	
Progressive Lenses	<ul style="list-style-type: none"> Standard progressive lenses Premium progressive lenses Custom progressive lenses 	\$0 \$95 – \$105 \$150 – \$175	Progressive Lenses	<ul style="list-style-type: none"> Standard progressive lenses Premium progressive lenses Custom progressive lenses 	\$0 \$95 – \$105 \$150 – \$175
Lens Enhancements	<ul style="list-style-type: none"> ► Anti-glare coating Scratch-resistant coating Impact-resistant lenses—adults UV coating Tints Light-reactive lenses Average 30% savings on other lens enhancements 	\$41 – \$85 \$0 \$0 \$0 \$15 \$75	Lens Enhancements	<ul style="list-style-type: none"> All TechShield anti-glare coatings Other anti-glare coatings Scratch-resistant coating Impact-resistant lenses—adults UV coating Tints Light-reactive lenses Average 30% savings on other lens enhancements 	\$0 \$21 – \$65 \$0 \$0 \$0 \$0 \$0
Contacts (instead of glasses)	<ul style="list-style-type: none"> \$120 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation) Every calendar year 	Up to \$55	Contacts (instead of glasses)	<ul style="list-style-type: none"> \$150 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation) Every calendar year 	Up to \$55

NEW BENEFITS FOR 2022

► VSP KidsCare™	<ul style="list-style-type: none"> Dependents under 18 have two, fully covered WellVision exams, if needed. An additional set of lenses (or contacts) is covered in the same plan year, if needed. Minimum prescription change is required. Any plan copays for exam and/or materials apply towards additional services. 	Copay applies.
► VSP LightCare™	Visit a VSP network doctor and choose either prescription eyewear coverage, or use your frame and lens allowance toward ready-to-wear: <ul style="list-style-type: none"> Non-prescription sunglasses or Non-prescription blue light filtering glasses 	Copay applies.
► Essential Medical Eye Care	Did you know optometrists specialize in treatment for all eye care services? You can call your VSP network doctor first, which may help you avoid a visit to your primary care physician or the emergency room for urgent eye care issues. <ul style="list-style-type: none"> Covered-in-full retinal screening for members with diabetes. 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 doctor for details. 	\$0 \$0

Standard Option Plan Premiums

High Option Plan Premiums

	Bi-weekly	Monthly	Bi-weekly	Monthly
Self Only	\$3.57	\$7.74	\$6.71	\$14.54
Self + One	\$7.13	\$15.45	\$13.44	\$29.12
Self + Family	\$10.71	\$23.21	\$20.17	\$43.70

Extra Savings

Glasses and Sunglasses <ul style="list-style-type: none"> 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP doctor within 12 months of your last WellVision Exam. Laser Vision Correction <ul style="list-style-type: none"> Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities. Contacts <ul style="list-style-type: none"> 15% savings on a contact lens exam from any VSP provider. 	Retinal Screening <ul style="list-style-type: none"> No more than a \$39 copay on routine retinal screening as an enhancement to your WellVision Exam for members without diabetes. Out-of-network <ul style="list-style-type: none"> Get the most out of your benefits and greater savings with a VSP in-network doctor or when you use your benefits on Eyeconic. Call Member Services at 800.807.0764 for out-of-network plan details.
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VSP guarantees service from VSP doctors only. 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. Coverage with a retail chain may be different or not apply.

NEW FOR 2022

YOUR EYES WILL LOVE THESE UPGRADES.

We appreciate every single VSP member and want to say thank you for trusting your eyes to our network of doctors. One way we can thank you is by continuing to offer new enhancements to both the Standard Option and High Option plans. Check out the great offerings in store for you in 2022:

Your annual eye exam is \$0. That's right, it's fully covered at all of our Premier Program locations.

Up to \$250 frame allowance. Enroll in the High Option and you'll get \$250 to spend on featured frame brands at Premier Program locations, or on any frame brand at Visionworks. Your standard frame allowance across the rest of the VSP network is higher too!

Get your eyewear at Walmart or Sam's Club. Your vision benefits can be used at these nationwide retailers.

No copay for standard progressives. If you need progressive lenses like so many of us do, there's no copay in either plan.

KidsCare protects your children's vision. It's new this year and available in both plans.

Eyewear for everyone! Even if you don't wear prescription glasses, you can still protect your eyes from the sun and blue light with LightCare. It's also new for 2022 and included in both plans.

Questions? Visit choosevsp.com or call 800.807.0764.



Classification: Public

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