A Look at Your VSP Vision Coverage

With VSP and Pulmonx Corporation, your health comes first.



As a member, you'll get access to savings and personalized vision care from a VSP network doctor for you and your family.

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 over \$3,000 in savings.

Provider choices you want.

With private practice doctors and Visionworks retail locations to choose from nationwide, getting the most out of your benefits is easy at a VSP Premier Edge $^{\text{TM}}$ location.



Preferred private practice and retail in-network choices

private practice doctors

Visionworks

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.

vision care

More Ways to Save

Extra

\$20

to spend on Featured Frame Brands[†]

bebe

Calvin Klein

COLE HAAN

@DRAGON.

FLEXON

LONGCHAMP



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



Up to

40%

Savings on lens enhancements:

Your VSP Vision Benefits Summary

RENEELT

Pulmonx Corporation and VSP provide you with an affordable vision plan.

DESCRIPTION

PROVIDER NETWORK:

CODAY

VSP Signature



01/01/2025



EDECLIENCY

| BENEFIT | DESCRIPTION | COPAY | FREQUENCY |
|----------------------------------|--|--|-------------------------------|
| | Your Coverage with a VSP Provider | | |
| WELLVISION EXAM | Focuses on your eyes and overall wellnessRoutine retinal screening | \$10 Up to \$39 | Every 12 months |
| ESSENTIAL MEDICAL EYE CARE | 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. | \$20 per exam | Available as needed |
| PRESCRIPTION GLASSE | :S | \$25 | See frame and lenses |
| FRAME ⁺ | \$170 Featured Frame Brands allowance \$150 frame allowance 20% savings on the amount over your allowance \$150 Walmart/Sam's Club frame allowance \$80 Costco frame allowance | Included in Prescription Glasses | Every 12 months |
| LENSES | Single vision, lined bifocal, and lined trifocal lenses Impact-resistant lenses for dependent children | Included in Prescription Glasses | Every 12 months |
| LENS ENHANCEMENTS | Standard progressive lenses Premium progressive lenses Custom progressive lenses Tints/Light-reactive lenses Average savings of 40% on other lens enhancements | \$0 \$80 - \$90 \$120 - \$160 \$0 | Every 12 months |
| CONTACTS (INSTEAD OF GLASSES) | \$150 allowance for contacts; copay does not applyContact lens exam (fitting and evaluation) | Up to \$60 | Every 12 months |
| ADDITIONAL SAVINGS | Glasses and Sunglasses Discover all current eyewear offers and savings at vsp.com/offe 30% savings on unlimited additional pairs of prescription or nor lens enhancements, from the same VSP provider on the same day from a VSP provider within 12 months of your last WellVision Ex Laser Vision Correction Average of 15% off the regular price; discounts available at cont After surgery, use your frame allowance (if eligible) for sunglass Exclusive Member Extras for VSP Members Contact lens rebates, lens satisfaction guarantees, and more off Save up to 60% on digital hearing aids with TruHearing®. Visit vs details. | n-prescription glass as your WellVision am. racted facilities. es from any VSP do ers at vsp.com/offe | Exam. Or get 20% saving octor |

online in-network choices. Log in to vsp.com to find an in-network provider. Your plan provides the following out-of-network reimbursements: Examup to \$50 Lined Bifocal Lensesup to \$75 Contactsup to \$105 Tintsup to \$5 Frameup to \$70 Lined Trifocal Lensesup to \$100 Progressive Lensesup to \$75 Single Vision Lensesup to \$50

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

15avings 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. Premier Edge is not available for some members in the state of Texas.

To learn about your privacy rights and how your protected health information may be used, see the VSP Notice of Privacy Practices on vsp.com.

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