



# Life is better in focus

## Access to high-quality routine eye care and eyewear with Summit Health Plan and VSP® Vision Care.

As a member, you'll receive access to care from eye doctors, quality eyewear, and the affordability you deserve.

### Using your VSP benefit is easy

1. Create an account at [vsp.com](https://vsp.com). Review your personalized benefit information.
2. Find a Advantage network eye doctor who's right for you. Visit [vsp.com/advantageonly](https://vsp.com/advantageonly) or call 844.820.8723, TTY 800.428.4833.
3. At your appointment, tell them you have VSP. Present your health plan medical ID card to your Advantage network doctor.

**That's it! We'll handle the rest**—there are no claim forms to complete when you see a VSP Advantage network doctor.

### Importance of a routine eye exam

Your VSP Advantage network doctor will help keep you and your eyes healthy with a WellVision Exam®—a comprehensive exam that can detect signs of health conditions such as glaucoma, diabetes, and macular degeneration.

Early diagnosis, especially with the rapid growth of pre-diabetes and diabetes, gets you the personalized care you deserve to manage your health and feel your best.

### Contact us

Visit [vsp.com](https://vsp.com)  
Call 844.820.8723  
TTY 800.428.4833

**VSP Member Services is available:**  
Monday – Friday, 8 AM – 8 PM (PST)  
Saturday – Sunday, 8 AM – 8 PM (PST)

## Your VSP Vision Benefits Summary

Summit Health Plan and VSP provide you with an affordable eye care plan.

Benefit	Description	Copay	Frequency
<b>Your Coverage with a VSP Advantage Network Doctor</b>			
<b>WellVision Exam</b>	Comprehensive exam that can detect signs of health conditions such as glaucoma, diabetes, and macular degeneration.	\$0	Every calendar year
<b>Prescription Glasses</b>		<b>\$0</b>	
<b>Frame</b>	Covered-in-full frame from the Genesis eyewear collection, or \$50 retail frame allowance toward another frame	Included with prescription glasses	Every other calendar year
<b>Lenses</b>	Single vision, lined bifocal, lined trifocal, and lenticular lenses	Included with prescription glasses	Every other calendar year
<b>Lens Enhancements</b>	<ul style="list-style-type: none"> <li>Standard progressive lenses</li> <li>Scratch-resistant coating</li> </ul> All other lens enhancements members save on average 20-25%	Covered	Every other calendar year
<b>Contacts (instead of glasses)</b>	<ul style="list-style-type: none"> <li>\$100 allowance for contacts and contact lens exam (fitting and evaluation)</li> <li>15% savings on a contact lens exam (fitting and evaluation)</li> </ul>	\$0	Every other calendar year
<b>Your Coverage with Out-of-Network Providers</b> <ul style="list-style-type: none"> <li>Exam – 50% member coinsurance of doctor’s charges</li> <li>Lenses – 50% member coinsurance (not lens enhancements) of doctors charges</li> <li>Frame – \$50 allowance</li> <li>Elective Contact Lenses and fitting evaluation– \$100 allowance</li> <li>Necessary Contact Lenses – 50% member coinsurance of doctor’s charges</li> </ul> Get the most out of your benefits and greater savings with a VSP network doctor. Call Member Services for out-of-network plan details. Visit <a href="http://vsp.com">vsp.com</a> or call us at <b>844.820.8723</b> .			

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Summit Health Plan, Inc. is an HMO with a Medicare contract. Enrollment in Summit Health Plan, Inc. depends on contract renewal.