A Look at Your VSP Vision Coverage

With VSP and MESQUITE INDEPENDENT SCHOOL DISTRICT - PREMIER PLAN, your health comes first.



Enroll in VSP[®] Vision Care to 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 thousands of in-network locations to choose from, including private practice doctors and retail locations nationwide, getting the most out of your benefits is easy.

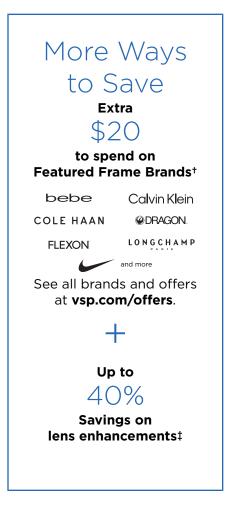
Quality vision care you need.

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.

vsp vision care



Enroll through your employer today. Contact us: **800.877.7195** or **vsp.com**

Your VSP Vision Benefits Summary

MESQUITE INDEPENDENT SCHOOL DISTRICT - PREMIER PLAN and VSP provide you with an affordable vision plan. **PROVIDER NETWORK:**

VSP Advantage **EFFECTIVE DATE:**

09/01/2025



BENEFIT	DESCRIPTION	COPAY	FREQUENCY
Your Coverage with a VSP Provider			
WELLVISION EXAM	Focuses on your eyes and overall wellnessRoutine retinal screening	\$15 Up to \$39	Every calendar year
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 GLASSES		\$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 calendar year
LENSES	 Single vision, lined bifocal, and lined trifocal lenses Impact-resistant lenses for dependent children 	Included in Prescription Glasses	Every calendar year
LENS ENHANCEMENTS	 Standard progressive lenses Premium progressive lenses Custom progressive lenses Tints/Light-reactive lenses Impact-resistant lenses Average savings of 30% on other lens enhancements 	\$0 \$50 \$50 \$75 \$0	Every calendar year
CONTACTS (INSTEAD OF GLASSES)	\$150 allowance for contacts; copay does not applyContact lens exam (fitting and evaluation)	Up to \$60	Every calendar year
ADDITIONAL SAVINGS	lasses and Sunglasses Discover all current eyewear offers and savings at vsp.com/offers. 20% savings on unlimited additional pairs of prescription or non-prescription glasses/sunglasses, including lens enhancements, from a VSP provider within 12 months of your last WellVision Exam. Aser Vision Correction Average of 15% off the regular price; discounts available at contracted facilities.		
	 Exclusive Member Extras for VSP Members Contact lens rebates, lens satisfaction guarantees, and more offers at vsp.com/offers. Save up to 60% on digital hearing aids with TruHearing[®]. Visit vsp.com/offers/special-offers/hearing-aids for details. Enjoy everyday savings on health, wellness, and more with VSP Simple Values. 		
YOUR MONTHLY CONTRIBUTION	\$11.25 Member only \$19.72 Member + spouse \$21.76 Mem	nber + child(ren)	\$34.76 Member + family

COVERAGE WITH AN OUT-OF-NETWORK PROVIDER

With so many in-network choices, VSP makes it easy to get the most out of your benefits. You'll have access to preferred private practice, retail, and online in-network choices. Log in to vsp.com to find an in-network provider. Your plan provides the following out-of-network reimbursements: Exam up to \$45 Lined Bifocal Lenses up to \$50 Progressive Lensesup to \$50 Frame up to \$50 Lined Trifocal Lensesup to \$60 Contacts up to \$100 Single Vision Lensesup to \$30

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

1Savings 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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