



Protect
your vision
with VSP.

Get the best in eye care and eyewear with NRBT SIGNATURE PLAN A \$15 - VOLUNTARY and VSP® Vision Care.



VSP invests 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.
- **Choice of Providers.** The decision is yours to make—choose a VSP doctor, a participating retail chain, or any out-of-network provider.
- **Great Eyewear.** It's easy to find the perfect frame at a price that fits your budget.

Using your VSP benefit is easy.

- **Register at 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 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.

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 to find a VSP provider who carries these brands.

Plan Information:

NRBT Signature Plan A \$15

VSP Provider Network: Signature

Your VSP Vision Benefits Summary

NRBT SIGNATURE PLAN A \$15 - VOLUNTARY and VSP provide you with an affordable eye care plan.



NRBT Signature Plan A \$15

| Benefit | Description | Copay | Frequency |
|---|--|--------------------------------------|-----------------|
| Your Coverage with a VSP Provider | | | |
| WellVision Exam | <ul style="list-style-type: none">Focuses on your eyes and overall wellness | \$15 for exam and glasses | Every 12 months |
| Prescription Glasses | | | |
| Frame | <ul style="list-style-type: none">\$150 allowance for a wide selection of frames\$170 allowance for featured frame brands20% savings on the amount over your allowance\$80 Costco® frame allowance | Combined with exam | Every 24 months |
| Lenses | <ul style="list-style-type: none">Single vision, lined bifocal, and lined trifocal lensesPolycarbonate lenses for dependent children | Combined with exam | Every 24 months |
| Lens Enhancements | <ul style="list-style-type: none">Standard progressive lensesPremium progressive lensesCustom progressive lensesAverage savings of 35-40% on other lens enhancements | \$50 \$80 - \$90 \$120 - \$160 | Every 24 months |
| Contacts (instead of glasses) | <ul style="list-style-type: none">\$150 allowance for contacts; copay does not applyContact lens exam (fitting and evaluation) | Up to \$60 | Every 24 months |
| Primary Eyecare | <ul style="list-style-type: none">Treatment and diagnosis of eye conditions like pink eye, vision loss and monitoring of cataracts, glaucoma and diabetic retinopathy. Limitations and coordination with medical coverage may apply. Ask your VSP doctor for details. | \$20 | As needed |
| Extra Savings | Glasses and Sunglasses <ul style="list-style-type: none">Extra \$20 to spend on featured frame brands. Go to vsp.com/specialoffers for details.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. | | |
| | Retinal Screening <ul style="list-style-type: none">No more than a \$39 copay on routine retinal screening as an enhancement to a 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 facilitiesAfter surgery, use your frame allowance (if eligible) for sunglasses from any VSP doctor | | |
| Your Coverage with Out-of-Network Providers | | | |
| Visit vsp.com for details, if you plan to see a provider other than a VSP network provider. | | | |
| Exam | up to \$50 | Lined Bifocal Lenses | up to \$75 |
| Frame | up to \$70 | Lined Trifocal Lenses | up to \$100 |
| Single Vision Lenses | up to \$50 | Progressive Lenses | up to \$75 |
| | | Contacts | up to \$105 |
| Coverage with a participating retail chain may be different. Once your benefit is effective, visit vsp.com for details. Based on applicable laws, benefits may vary by location. | | | |

Contact us. [800.877.7195](tel:800.877.7195) | vsp.com

¹Brands/Promotion subject to change.

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