

VISION BENEFITS



To help you take care of your eyesight, The City of Bellevue provides you the option of two vision care plans through VSP Vision Care:

- Exam which covers an exam only, or
- Exam & Hardware which covers both an exam and vision hardware.

VSP offers you access to a large network of doctors nationwide. You may choose to obtain your vision care services from any provider you wish. When you access care from VSP network providers, your benefits are greater, and your out-of-pocket costs are less. You may call VSP direct to find a VSP doctor and a retail chain provider and view special offers by visiting their website at www.vsp.com or calling 1.800.877.7195. Click "create an account" under "Members" to register and login to their website.

Please refer to the table below to find out how often you are eligible for services.

Note: Your VSP Member ID is not your social security number. The VSP Member ID is 9 digits in length. Please use the appropriate number of leading zeroes and then your 5-digit or 6-digit employee ID number. Look for your employee ID number on your paycheck stub.

	Exam Plan		Exam & Hardware Plan	
	VSP Provider	Non-Participating*	VSP Provider	Non-Participating*
Co-pay for all Services				
• Exams	\$20 co-pay	\$20 co-pay	\$20 co-pay	\$20 co-pay
• Prescription Glasses	Not Covered	Not Covered	\$20 co-pay	\$20 co-pay

After the co-pays have been satisfied, your cost shares will be as follows:

Eye Exam (once every calendar year)	Covered in Full	Up to \$50	Covered in Full	Up to \$50
Basic Lenses (once every calendar year)				Plan Pays...
• Single	Not Covered	Not Covered	Covered in Full	Up to \$50
• Lined Bifocals	Not Covered	Not Covered	Covered in Full	Up to \$75
• Lined Trifocals	Not Covered	Not Covered	Covered in Full	Up to \$100
Frames (once every calendar year)	Not Covered	Not Covered	Covered in Full up to \$175	Up to \$70
• Costco Allowance	Not Covered	Not Covered	Covered in Full up to \$95	Not Covered
Contact Lenses (once every calendar year in lieu of lenses and frames)			(up to \$60 co-pay for fitting & evaluation)	
• Elective	Not Covered	Not Covered	Covered in Full up to \$175	Up to \$160
• Medically Necessary	Not Covered	Not Covered	Covered in Full after \$20 co-pay	Up to \$50

***NOTE:** When you use non-participating provider, you will be required to pay upfront for your services and submit your claim to VSP for reimbursement up to the amount shown in the table above.

VSP has contracted with retail chain providers in addition to a VSP doctor. To locate all providers in your area, please login to your account on vsp.com. Participating Retail Chains provide members the same covered-in-full benefit experience they receive from a VSP Doctor, with minor exceptions like the frame allowance at Costco. Participating Retail Chains can check eligibility online and submit claims to VSP. As a note, not all Costco doctors are on VSP's network, please verify their participation in the VSP network. Additional information can be found at CityofBellevue.benefithub.com.

NOTE

For the Exam & Hardware Plan standard progressive lenses and tints are covered in full if obtained from a VSP doctor.

All other lens options are not covered; however, you will receive an average of 35-40% savings on all non-covered lens options like anti-reflective coatings or scratch resistant coatings from a VSP doctor. Be sure to ask your provider for details or call VSP.

When purchasing a frame from an in-network provider you will receive a 20% discount on the amount over your \$175 allowance.

