

Your Vision Benefits Summary

Get the best in eyecare and eyewear with NORTH RANCH BENEFIT TRUST -VOLUNTARY and VSP[®] Vision Care.

Using your VSP benefit is easy.

- Register at vsp.com. Once your plan is effective, review your benefit information.
- Find an eyecare provider who's right for you. The decision is yours to make—choose a VSP provider or any out-of-network provider. 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

VSP Coverage Effective Date: 01/01/2016 VSP Provider Network: VSP Signature

NRBT Signature Plan B \$15/30

Benefit	Description	Сорау
	Your Coverage with a VSP Provider	
WellVision Exam	 Focuses on your eyes and overall wellness Every 12 months 	\$15
Prescription G	lasses	\$30
Frame	 \$150 allowance for a wide selection of frames \$170 allowance for featured frame brands 20% savings on the amount over your allowance Every 24 months 	Included in Prescription Glasses
Lenses	 Single vision, lined bifocal, and lined trifocal lenses Every 12 months 	Included in Prescription Glasses
Lens Enhancements	 Polycarbonate lenses Standard progressive lenses Premium progressive lenses Custom progressive lenses Average savings of 35-40% on other lens enhancements Every 12 months 	\$0 \$50 \$80 - \$90 \$120 - \$160
Contacts (instead of glasses)	 \$150 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation) Every 12 months 	Up to \$60
Additional Coverage	Primary Eyecare	
	Glasses and Sunglasses	
	 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 you last WellVision Exam. 	
Extra Savings	 Retinal Screening No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam 	
	 Laser Vision Correction Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities After 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 Examup to \$50 Frameup to \$70 Single Vision Lensesup to \$100 Progressive Lensesup to \$75 Contactsup to \$105		

VSP guarantees coverage from VSP network 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.

Single Vision Lenses.....up to \$50

Lined Bifocal Lenses.....up to \$75

Visit **vsp.com** or call **800.877.7195** for more details on your vision coverage and exclusive savings and promotions for VSP members.

¹Brands/Promotion subject to chan

.....up to \$105

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Contacts