

Providence Health Plan Vision Through VSP

Providence Health Plan partners with Vision Service Plan, or VSP, the largest nonprofit vision benefits and services company in the U.S.

If members seek services from a VSP participating provider, adult 'WellVision' eye exams are covered after the \$10 copay, once every 12 months. under their medical plan. Additional fees may apply for contact lens exams and fitting.

For Vision Basic, Plus or Premium, one pair of lenses (single vision, lined bifocal or trifocal) are covered in full and frames or elective contracts (in lieu of glasses) are covered up to \$130. Frequency of frames, lenses and contacts vary based on plan selected.

Pediatric, frames (from the Pediatric Exchange Collection) lenses and contacts are covered in full once every 12 months.

If members use a non-participating provider, lower limits apply. Refer to benefit summary for details.

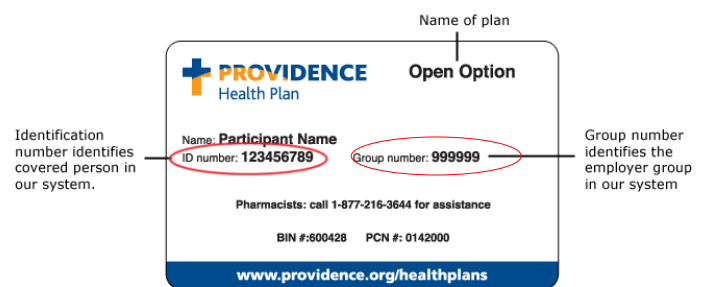
Accessing services

- Choose a participating VSP provider from our online directory.
- Explain that you have VSP thru Providence and provide your ID number.
- VSP handles the rest.
- No claim form or ID card required.
- If you choose to receive services from a non-VSP Preferred Provider, you can request reimbursement from VSP.
- Contact VSP with questions: 1-800-877-7195.

What's the VSP ID number?

VSP requires a unique 17-digit ID composed of the member ID + group number.

This information is listed on the Providence Health Plan health ID card.



Example

Member: John Smith

ID #: 100112222-02

Group #: 100710

John's VSP member ID = 11-digit member ID + 6-digit group number = 10011222202100710.

Each member is set-up separately, so dependents will have a separate, unique VSP ID number.