

# Get the best in eye care and eyewear with W.L. GORE & ASSOCIATES, INC. and VSP® Vision Care.

Why enroll in VSP? We invest 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.

- Create an account 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 bebe®, Calvin Klein, Cole Haan, Flexon®, Lacoste, Nike, Nine West, and more¹. Visit **vsp.com** to find a Premier Program location that carries these brands. Prefer to shop online? Check out all of the brands at **Eyeconic.com**, VSP's online eyewear store.



Enroll in VSP today. You'll be glad you did. Contact us. 800.877.7195 vsp.com

## **Your VSP Vision Benefits Summary**



W.L. GORE & ASSOCIATES, INC. and VSP provide you with an affordable eye care plan.

| VSP Provider | Network: | <b>VSP</b> | Signature |
|--------------|----------|------------|-----------|
|--------------|----------|------------|-----------|

| Benefit  | Description   | Copay                                  | Frequency            |  |
|--|---|--|----------------------|--|
|  | Your Coverage with a VSP Provider   |  |                      |  |
| WellVision Exam  | Focuses on your eyes and overall wellness   | \$15                                   | Every calendar year  |  |
| Prescription Glasses   |   | \$15                                   | See frame and lenses |  |
| Frame  | <ul> <li>\$130 allowance for a wide selection of frames</li> <li>\$150 allowance for featured frame brands</li> <li>20% savings on the amount over your allowance</li> <li>\$70 Costco® frame allowance</li> </ul>  | Included in<br>Prescription<br>Glasses | Every calendar year  |  |
| Lenses   | Single vision, lined bifocal, and lined trifocal lenses   | Included in<br>Prescription<br>Glasses | Every calendar year  |  |
| Lens Enhancements  | <ul> <li>Standard progressive lenses</li> <li>Premium progressive lenses</li> <li>Custom progressive lenses</li> <li>Average savings of 35-40% on other lens enhancements</li> </ul>  | \$50<br>\$80 - \$90<br>\$120 - \$160   | Every calendar year  |  |
| Contacts (instead of glasses)  | <ul><li>\$130 allowance for contacts; copay does not apply</li><li>Contact lens exam (fitting and evaluation)</li></ul>   | Up to \$60                             | Every calendar year  |  |
| Diabetic Eyecare Plus<br>Program   | <ul> <li>Services related to diabetic eye disease, glaucoma and age-related<br/>macular degeneration (AMD). Retinal screening for eligible members<br/>with diabetes. Limitations and coordination with medical coverage<br/>may apply. Ask your VSP doctor for details.</li> </ul> | \$20                                   | As needed            |  |
| <ul> <li>Glasses and Sunglasses</li> <li>Extra \$20 to spend on featured frame brands. Go to vsp.com/specialoffers for details.</li> <li>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.</li> </ul> |   |  |                      |  |
| Extra Savings  | <ul> <li>Retinal Screening</li> <li>No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam</li> </ul>  |  |                      |  |
| <ul> <li>Laser Vision Correction</li> <li>Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilitie</li> <li>After surgery, use your frame allowance (if eligible) for sunglasses from any VSP doctor</li> </ul>   |   |  |                      |  |

#### 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 \$45                  | Lined Bifocal Lensesup to \$65  | Progressive Lensesup to \$65 |
|---------------------------------|---------------------------------|------------------------------|
| Frameup to \$70                 | Lined Trifocal Lensesup to \$85 | Contactsup to \$105          |
| Single Vision Lenses up to \$45 |                                 |                              |

Coverage with a participating retail chain may be different. Once your benefit is effective, visit vsp.com for details. 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.

### Contact us. 800.877.7195 | vsp.com