

Your VSP Vision Benefits Summary

Honeywell and VSP provide you with an affordable vision plan.

Provider Network:

VSP Choice

Effective Date:

01/01/2024



| BENEFIT | DESCRIPTION | COPAY | FREQUENCY |
|---------------------------------------|---|----------------------------------|---------------------------|
| PREMIER PLUS PLAN | | | |
| WELLVISION EXAM | <ul style="list-style-type: none"> Focuses on your eyes and overall wellness Routine retinal screening | \$10 Up to \$39 | Every calendar year |
| PRESCRIPTION GLASSES | | \$25 | See frame and lenses |
| FRAME⁺ | <ul style="list-style-type: none"> \$220 Featured Frame Brands allowance \$200 frame allowance 20% savings on the amount over your allowance | Included in Prescription Glasses | Every calendar year |
| LENSES | <ul style="list-style-type: none"> Single vision, lined bifocal, and lined trifocal lenses Impact-resistant lenses for dependent children | Included in Prescription Glasses | Every calendar year |
| CONTACTS (INSTEAD OF GLASSES) | <ul style="list-style-type: none"> \$200 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation) | \$0 | Every calendar year |
| VSP LIGHTCARE⁺ | <ul style="list-style-type: none"> \$200 allowance for ready-made non-prescription sunglasses, or ready-made non-prescription blue light filtering glasses, instead of prescription glasses or contacts | \$25 | Every calendar year |
| PREMIER PLAN | | | |
| WELLVISION EXAM | <ul style="list-style-type: none"> Focuses on your eyes and overall wellness Routine retinal screening | \$10 Up to \$39 | Every calendar year |
| PRESCRIPTION GLASSES | | \$25 | See frame and lenses |
| FRAME⁺ | <ul style="list-style-type: none"> \$170 Featured Frame Brands allowance \$150 frame allowance 20% savings on the amount over your allowance | Included in Prescription Glasses | Every other calendar year |
| LENSES | <ul style="list-style-type: none"> Single vision, lined bifocal, and lined trifocal lenses Impact-resistant lenses for dependent children | Included in Prescription Glasses | Every calendar year |
| CONTACTS (INSTEAD OF GLASSES) | <ul style="list-style-type: none"> \$150 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation) | \$0 | Every calendar year |
| VSP LIGHTCARE⁺ | <ul style="list-style-type: none"> \$150 allowance for ready-made non-prescription sunglasses, or ready-made non-prescription blue light filtering glasses, instead of prescription glasses or contacts | \$25 | Every other calendar year |
| BASE PLAN | | | |
| WELLVISION EXAM* | <ul style="list-style-type: none"> Focuses on your eyes and overall wellness Routine retinal screening | \$10 Up to \$39 | Every other calendar year |
| PRESCRIPTION GLASSES | | \$40 | See frame and lenses |
| FRAME⁺ | <ul style="list-style-type: none"> \$115 Featured Frame Brands allowance \$95 frame allowance 20% savings on the amount over your allowance | Included in Prescription Glasses | Every other calendar year |
| LENSES | <ul style="list-style-type: none"> Single vision, lined bifocal, and lined trifocal lenses Impact-resistant lenses for dependent children | Included in Prescription Glasses | Every other calendar year |
| CONTACTS (INSTEAD OF GLASSES)* | <ul style="list-style-type: none"> \$100 allowance for WellVision Exam, contacts and contact lens exam (fitting and evaluation) | \$0 | Every other calendar year |
| VSP PEDIATRIC ELEMENTS | <ul style="list-style-type: none"> Your child is fully-covered for an eye exam and glasses or contacts every year. Choose a frame from our exclusive Otis & Piper™ Eyewear Collection, or select a fully-covered contact lens exam and a minimum three-month supply of contact lenses. Ask your doctor for details. Coordination with medical coverage may apply. Ask your VSP doctor for details. | \$0 | Every calendar year |
| APPLIES TO ALL OPTIONS | | | |
| ESSENTIAL MEDICAL EYE CARE | <ul style="list-style-type: none"> Retinal imaging for members with diabetes covered-in-full Additional exams and services beyond routine care to treat immediate issues from pink eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more. Coordination with your medical coverage may apply. Ask your VSP network doctor for details. | \$20 per exam | Available as needed |
| ADDITIONAL SAVINGS | <p>Glasses and Sunglasses</p> <ul style="list-style-type: none"> Discover all current eyewear offers and savings at vsp.com/offers. 20% savings on unlimited additional pairs of prescription or non-prescription glasses/sunglasses, including lens enhancements, from a VSP provider within 12 months of your last WellVision Exam. <p>Laser Vision Correction</p> <ul style="list-style-type: none"> Average of 15% off the regular price; discounts available at contracted facilities. <p>Exclusive Member Extras</p> <ul style="list-style-type: none"> Contact lens rebates, lens satisfaction guarantees, and more offers at vsp.com/offers. Save up to 60% on digital hearing aids with TruHearing. Visit vsp.com/offers/special-offers/hearing-aids for details. Everyday savings on entertainment, health and wellness, travel, and more with VSP Simple Values. | | |

*If you choose contacts (instead of glasses), the allowance for contacts applies to the cost of your eye exam and the exam copay does not apply.

A Look at Your VSP Vision Coverage

With VSP and Honeywell, your health
comes first.



Enroll in VSP® Vision Care to get access to savings and personalized vision care from a VSP network doctor for you and your family.

Value and savings you love.

Save on eyewear and eye care when you see a VSP network doctor. Plus, take advantage of Exclusive Member Extras which provide offers from VSP and leading industry brands totaling at over \$3,000 in savings.

Provider choices you want.



With thousands of choices, getting the most out of your benefits is easy at a VSP Premier Edge™ location.

Shop online and connect your benefits.



Eyeconic® is the preferred VSP online retailer where you can shop in-network with your vision benefits. See your savings in real time when you shop over 70 brands of contacts, eyeglasses, and sunglasses.

Quality vision care you need.

You'll get great care from a VSP network doctor, including a WellVision Exam®. An annual eye exam not only helps you see well, but helps a doctor detect signs of eye conditions and health conditions, like diabetes and high blood pressure.

Using your benefit is easy!

Create an account on **vsp.com** to view your in-network coverage, find the VSP network doctor who's right for you, and discover savings with Exclusive Member Extras. At your appointment, just tell them you have VSP.

vsp
vision care

More Ways
to Save

An additional
\$20
to spend on
Featured Frame Brands†

bebe CALVIN KLEIN
COLE HAAN DRAGON
FLEXON LACOSTE
and more

See all brands and offers
at **vsp.com/offers**.

+

Up to
40%
Savings on
lens enhancements‡

Enroll through your employer today.
Contact us: **800.877.7195** or **vsp.com**

†Only available to VSP members with applicable plan benefits. Frame brands and promotions are subject to change.

‡Savings based on doctor's retail price and vary by plan and purchase selection; average savings determined after benefits are applied. Ask your VSP network doctor for more details.

*Coverage with a retail chain may be different or not apply.

VSP guarantees member satisfaction from VSP 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. In the state of Washington, VSP Vision Care, Inc., is the legal name of the corporation through which VSP does business. TruHearing is not available directly from VSP in the states of California and Washington.

To learn about your privacy rights and how your protected health information may be used, see the VSP Notice of Privacy Practices on **vsp.com**.

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