

VSP Safety EyeCare Plan

Created for: Sunlife

Work related eye injuries cost businesses an estimated \$300 million annually in medical bills, compensation, and downtime, not including the loss of employee productivity. Plus, even a minor eye injury can cause your employee life-long vision problems and suffering. The solution? VSP Safety EyeCare Plan.

Benefits through a VSP Network Provider	
Exam Services	 Covered comprehensive exam, specifically tailored to determine hazardous work environment needs.
Prescription Lenses	 Single vision, lined bifocal and lined trifocal lenses are covered-in- full¹ Prescription safety lenses that meet the necessary requirements specified by American National Standards Institute (ANSI) for impact protection Lens enhancements are covered after a copay, savings members an average of 40%
Safety Frame	 All safety frames are tested and certified according to current ANSI & OSHA requirements Covered-in-full frames up to the retail allowance 20% savings on any amount above the retail allowance
VSP Laser VisionCare ^{s™} Program	 VSP-contracted laser vision centers provide discounts for laser vision correction, including LASIK, Custom LASIK, PRK, Custom PRK, and Bladeless LASIK Discounts are only available from VSP-contracted centers. Also, custom LASIK coverage only available using wavefront technology with the microkeratome surgical device, other LASIK procedures may be performed at an additional cost to the member.
Out-of-Network Schedule	We offer a generous reimbursement schedule for services from other providers Lenses Single vision: \$35 Lined bifocal: \$45 Lined trifocal:\$60 Frame: \$25
Workplace Safety Facts	
Prevent Work-related Eye Injuries	 There are nearly 300,000 work-related eye injuries each year.² While vision loss is among the top 10 disabilities among Americans, 90% of eye injuries are preventable with proper eyewear protection More than 2,000 people injure their eyes at work each day³

Disclaimers and Exclusions

Based on applicable laws, benefits may vary by location. The following items are excluded under this plan:

- Services and/or materials not indicated on this schedule as covered plan benefits.
- Plano lenses (lenses with refractive correction of less than ± .50 diopter), •
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- Two pair of glasses instead of bifocals. Replacement of lenses and frames furnished under this plan which are lost or broken, except at the normal intervals when services are otherwise available. •
- Contact lenses.
- **Rimless Frames**
- No coordination of benefits

No dependent coverage In the event of a conflict between this information and your organization's contract with VSP, the terms of the contract will prevail.

¹ Less any applicable copay
 ² The Vision Council of America (2010).
 ³ Centers for Disease Control and Prevention (2013)