

VSP offers you great vision care coverage.

As a State of Wisconsin employee, vision coverage is now available as a payroll deduction for you and your eligible dependents.

Sign up for **VSP® Vision Care** from October 5 to November 13, 2009. Coverage begins January 1, 2010.

See how much you can save with VSP.

	Without VSP*	With VSP
Eye Exam	\$102	\$10 Copay
Frame	\$130	\$25 Copay
Single-vision Lenses	\$76	
Scratch Resistant Coating	\$40	\$0
Employee Annual Premium (pre-tax)	N/A	\$63
Total with Glasses	\$348	\$98

* Comparison based on state averages for eye exams and most commonly dispensed brands.

Without eyecare coverage, just **one office visit** for one person can **cost \$300 or more**.
With VSP coverage, you'll save.

You'll save
\$250
 on average.

Enrolling in VSP is a snap.

Choose **one** of these four convenient options:

- 1. Online:** Visit VSP at vsp.com/go/stateofwiemployees and complete the online enrollment form.
- 2. Phone:** Call VSP at **800.400.4569** and speak with a Member Services representative, Monday through Friday, 7:00 a.m. to 9:00 p.m., Central time.
- 3. By Mail:** Complete and mail the VSP Enrollment Form in the enclosed envelope.
- 4. By Fax:** Complete and fax the VSP Enrollment Form to **916.463.9031**.

Choose the coverage that's best for you.

	Monthly
• Employee Only	\$5.24
• Employee + Spouse/Domestic Partner	\$10.49
• Employee + Child(ren)	\$11.23
• Employee + Family	\$17.93





Your VSP Vision Benefits

Why enroll in a VSP® Vision Care plan? Because we'll help keep you and your eyes healthy with personalized care from a doctor you can trust.

You'll like what you see with VSP:

- **Personalized Care.** Our doctors take the time to get to know you and your eyes. They'll look for vision problems and signs of other health conditions too.
- **Doctor Network.** You'll find the VSP doctor who's right for you at vsp.com/choice or by calling us at **800.400.4569**. Our doctors offer flexible hours, a variety of office settings, and eyewear choices you'll love.
- **Value and Savings.** You'll get great savings on your eye exam and eyewear, and discounts on laser vision correction.
- **Satisfaction Guaranteed.** You'll be 100% happy or we'll make it right.

Visit the Eyecare Discovery Center® at vsp.com for eye health articles, videos, and interactive games.

**Enroll today.
You'll be glad you did.**

After open enrollment, VSP will send a welcome letter confirming your enrollment. Once enrolled, simply tell your VSP doctor you're a member. We'll handle the rest.

Contact VSP. | vsp.com/go/stateofwiemployees
800.400.4569



VSP provides you with an affordable, employee paid eyecare plan. Sign up for VSP today.

Important Dates

Open Enrollment **October 5-November 13, 2009**
VSP Coverage Effective **January 1, 2010**

Your Coverage from a VSP Doctor

- WellVision Exam®** focuses on your eye health and overall wellness
- \$10.00 copay **every calendar year**
- Prescription Glasses**
- \$25.00 copay
- Lenses** **every calendar year**
- *Single vision, lined bifocal, and lined trifocal lenses and scratch resistant coating.*
 - *Polycarbonate lenses for dependent children.*
- Frame**..... **every other calendar year**
- *\$130.00 allowance for frame of your choice.*
 - *20% off the amount over your allowance.*
- ~OR~

- Contact Lens Care**
- **No copay** **every calendar year**
- \$105.00 allowance for contacts and the contact lens exam (fitting and evaluation). This additional exam ensures proper fit of your contacts.*

Current soft contact lens wearers may qualify for a special program that includes a contact lens evaluation and initial supply of replacement lenses.

Extra Discounts and Savings

- Glasses and Sunglasses**
- *Average 20-25% savings on all non-covered lens options*
 - *20% off additional glasses and sunglasses, including lens options, from any VSP doctor within 12 months of your last WellVision Exam*
- Contacts**
- *15% off cost of contact lens exam (fitting and evaluation)*
- Laser Vision Correction**
- *Average 15% off the regular price or 5% off the promotional price. Discounts only available from contracted facilities.*
- * Available from any VSP doctor within 12 months of your last eye exam

Your Contribution

Employee Only	\$5.24
Employee + Spouse/Domestic Partner	\$10.49
Employee + Child(ren)	\$11.23
Employee + Family	\$17.93

You get the best value from your benefit when you see a VSP doctor. If you see a non-VSP provider, you'll typically pay more out-of-pocket. You'll pay the provider in full and have 6 months to submit a claim to VSP for partial reimbursement less copays. Before seeing a non-VSP provider, call us at 800.400.4569.

Out-of-Network Reimbursement Amounts:

Exam	Up to \$40.00
Single vision lenses	Up to \$33.00
Lined bifocal lenses	Up to \$50.00
Lined trifocal lenses	Up to \$66.00
Frame.....	Up to \$45.00
Contacts.....	Up to \$105.00

VSP guarantees service from VSP doctors only. In the event of a conflict between this information and your organization's contract with VSP, the terms of the contract will prevail.