



Protect  
your vision  
with VSP.

## Get the best in eyecare and eyewear with SALESFORCE.COM 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.

- **Register at [vsp.com](http://vsp.com)** Once your plan is effective, review your benefit information.
- **Find an eyecare provider who's right for you.** To find a VSP provider, visit [vsp.com](http://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](http://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 Anne Klein, bebe®, Calvin Klein, Flexon®, Lacoste, Nike, Nine West, and more<sup>1</sup>. Visit [vsp.com](http://vsp.com) to find a VSP provider who carries these brands.

Enroll in VSP today.  
You'll be glad you did.  
Contact us. **800.877.7195**  
[vsp.com](http://vsp.com)

# Your VSP Vision Benefits Summary

SALESFORCE.COM and VSP provide you with a choice of affordable vision plans – choose the plan that's right for you.

Basic Plan			VSP Provider Network: VSP Signature			High Plan			VSP Provider Network: VSP Signature		
Benefit	Description	Copay	Benefit	Description	Copay	Benefit	Description	Copay	Benefit	Description	Copay
<b>Your Coverage with a VSP Provider</b>											
<b>WellVision Exam</b>	<ul style="list-style-type: none"> <li>Focuses on your eyes and overall wellness</li> <li>Every calendar year</li> </ul>	\$10 for exam and glasses	<b>WellVision Exam</b>	<ul style="list-style-type: none"> <li>Focuses on your eyes and overall wellness</li> <li>Every calendar year</li> </ul>	\$10 for exam and glasses	<b>WellVision Exam</b>	<ul style="list-style-type: none"> <li>Focuses on your eyes and overall wellness</li> <li>Every calendar year</li> </ul>	\$10 for exam and glasses	<b>WellVision Exam</b>	<ul style="list-style-type: none"> <li>Focuses on your eyes and overall wellness</li> <li>Every calendar year</li> </ul>	\$10 for exam and glasses
<b>Prescription Glasses</b>											
<b>Frame</b>	<ul style="list-style-type: none"> <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>\$80 allowance at Costco® Optical</li> <li>Every calendar year</li> </ul>	Combined with exam	<b>Frame</b>	<ul style="list-style-type: none"> <li>\$200 allowance for a wide selection of frames</li> <li>\$220 allowance for featured frame brands</li> <li>20% savings on the amount over your allowance</li> <li>\$80 allowance at Costco® Optical</li> <li>Every calendar year</li> </ul>	Combined with exam	<b>Frame</b>	<ul style="list-style-type: none"> <li>\$200 allowance for a wide selection of frames</li> <li>\$220 allowance for featured frame brands</li> <li>20% savings on the amount over your allowance</li> <li>\$80 allowance at Costco® Optical</li> <li>Every calendar year</li> </ul>	Combined with exam	<b>Frame</b>	<ul style="list-style-type: none"> <li>\$200 allowance for a wide selection of frames</li> <li>\$220 allowance for featured frame brands</li> <li>20% savings on the amount over your allowance</li> <li>\$80 allowance at Costco® Optical</li> <li>Every calendar year</li> </ul>	Combined with exam
<b>Lenses</b>	<ul style="list-style-type: none"> <li>Single vision, lined bifocal, and lined trifocal lenses</li> <li>Polycarbonate lenses for dependent children</li> <li>Every calendar year</li> </ul>	Combined with exam	<b>Lenses</b>	<ul style="list-style-type: none"> <li>Single vision, lined bifocal, and lined trifocal lenses</li> <li>Polycarbonate lenses for dependent children</li> <li>Every calendar year</li> </ul>	Combined with exam	<b>Lenses</b>	<ul style="list-style-type: none"> <li>Single vision, lined bifocal, and lined trifocal lenses</li> <li>Polycarbonate lenses for dependent children</li> <li>Every calendar year</li> </ul>	Combined with exam	<b>Lenses</b>	<ul style="list-style-type: none"> <li>Single vision, lined bifocal, and lined trifocal lenses</li> <li>Polycarbonate lenses for dependent children</li> <li>Every calendar year</li> </ul>	Combined with exam
<b>Lens Enhancements</b>	<ul style="list-style-type: none"> <li>Tints/Photochromic adaptive lenses</li> <li>Progressive lenses</li> <li>Average savings of 35-40% on other lens enhancements</li> <li>Every calendar year</li> </ul>	\$0 \$50 - \$160	<b>Lens Enhancements</b>	<ul style="list-style-type: none"> <li>Tints/Photochromic adaptive lenses</li> <li>Progressive lenses</li> <li>Average savings of 35-40% on other lens enhancements</li> <li>Every calendar year</li> </ul>	\$0 \$50 - \$160	<b>Lens Enhancements</b>	<ul style="list-style-type: none"> <li>Tints/Photochromic adaptive lenses</li> <li>Progressive lenses</li> <li>Average savings of 35-40% on other lens enhancements</li> <li>Every calendar year</li> </ul>	\$0 \$50 - \$160	<b>Lens Enhancements</b>	<ul style="list-style-type: none"> <li>Tints/Photochromic adaptive lenses</li> <li>Progressive lenses</li> <li>Average savings of 35-40% on other lens enhancements</li> <li>Every calendar year</li> </ul>	\$0 \$50 - \$160
<b>Contacts (instead of glasses)</b>	<ul style="list-style-type: none"> <li>\$130 allowance for contacts; copay does not apply</li> <li>Contact lens exam (fitting and evaluation)</li> <li>Every calendar year</li> </ul>	Up to \$60	<b>Contacts (instead of glasses)</b>	<ul style="list-style-type: none"> <li>\$200 allowance for contacts; copay does not apply</li> <li>Contact lens exam (fitting and evaluation)</li> <li>Every calendar year</li> </ul>	Up to \$60	<b>Contacts (instead of glasses)</b>	<ul style="list-style-type: none"> <li>\$200 allowance for contacts; copay does not apply</li> <li>Contact lens exam (fitting and evaluation)</li> <li>Every calendar year</li> </ul>	Up to \$60	<b>Contacts (instead of glasses)</b>	<ul style="list-style-type: none"> <li>\$200 allowance for contacts; copay does not apply</li> <li>Contact lens exam (fitting and evaluation)</li> <li>Every calendar year</li> </ul>	Up to \$60
<b>Laser VisionCare Preferred Program</b>											
<b>Laser VisionCare Preferred Program</b>	<ul style="list-style-type: none"> <li>\$500 allowance per eye for LASIK, Custom LASIK, and PRK</li> <li>Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities</li> <li>After surgery, use your frame allowance (if eligible) for sunglasses from any VSP doctor</li> <li>Once per lifetime</li> </ul>	\$0	<b>Second Pair</b>	<ul style="list-style-type: none"> <li>This enhancement allows you to get a second pair of glasses or contacts, subject to the same allowance as your first pair benefit.</li> <li>Every calendar year</li> </ul>	\$0	<b>Laser VisionCare Preferred Program</b>					
<b>Primary Eyecare</b>	<ul style="list-style-type: none"> <li>Treatment and diagnosis of eye conditions like pink eye, vision loss and monitoring of cataracts, glaucoma and diabetic retinopathy. Limitations and coordination with medical coverage may apply. Ask your VSP doctor for details.</li> <li>As needed</li> </ul>	\$20	<b>Laser VisionCare Preferred Program</b>	<ul style="list-style-type: none"> <li>\$500 allowance per eye for LASIK, Custom LASIK, and PRK</li> <li>Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities</li> <li>After surgery, use your frame allowance (if eligible) for sunglasses from any VSP doctor</li> <li>Once per lifetime</li> </ul>	\$0						
<b>Extra Savings</b>	<b>Glasses and Sunglasses</b> <ul style="list-style-type: none"> <li>Extra \$20 to spend on featured frame brands. Go to <a href="http://vsp.com/specialoffers">vsp.com/specialoffers</a> 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> <b>Retinal Screening</b> <ul style="list-style-type: none"> <li>No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam</li> </ul>										

### Your Coverage with Out-of-Network Providers

Visit [vsp.com](http://vsp.com) for details, if you plan to see a provider other than a VSP network provider.

Exam .....	up to \$50	Lined Bifocal Lenses .....	up to \$75	Contacts .....	up to \$105
Frame .....	up to \$70	Lined Trifocal Lenses .....	up to \$100	Tints .....	up to \$5
Single Vision Lenses .....	up to \$50	Progressive Lenses .....	up to \$75		

Coverage with a participating retail chain may be different. Once your benefit is effective, visit [vsp.com](http://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.

<sup>1</sup>Brands/Promotion subject to change.

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