

ESSENTIAL MEDICAL EYE CARE SERVICES

Your well-being is at the heart of everything we do. **During the month of April, 2020**, VSP members can access essential medical eye care.¹ The connection between your eyes and overall health is important and this expanded access will allow you to get eye care when you need it most.



WHAT'S INCLUDED IN ESSENTIAL MEDICAL EYE CARE?

Essential medical eye care services include, but are not limited to:

- Sudden vision changes or vision loss
- Eye trauma
- Pink eye
- Foreign body removal
- Other symptoms that interfere with or significantly hamper day-to-day activities

WE'RE HERE FOR YOU.

- Do you have lost or broken glasses, or you've run out of contacts, and don't have backup eyewear? You can use your routine VSP benefits for replacement glasses or contact lenses to meet your immediate eyewear needs.²
- If you're unable to reach your VSP network doctor to make an appointment, call VSP Customer Care at **800.877.7195** and we'll help you find an eye doctor who is open and ready to assist you.
- At your appointment, tell them you have VSP. There's no ID card necessary.
- We'll handle the rest—there are no claim forms to complete when you see a VSP doctor.

STAY HEALTHY. BE SAFE.

Access to essential medical eye care will help you maintain your overall health, while easing the burden on primary care physicians and emergency rooms.

**Get the eye care you need.
Questions? Call us at 800.877.7195.**

1. A \$20 copay may apply. These services are not available for discount plan members. Call VSP Customer Care at **800.877.7195** for assistance with checking your benefit eligibility and plan information.
2. Members can use their eligible routine benefits for lost or broken glasses, or replacement contact lenses, to meet immediate eyewear needs. Contact your VSP network doctor for assistance.

Nothing contained herein alters any existing coverage. No insurance premium is charged or collected for this April 2020 service expansion. Essential medical eye care services billed to VSP are supplemental to medical insurance. Your health insurance carrier should be billed as the primary payer when other coverage exists, and the doctor participates on your health plan's network.

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