BUCKEYE RESIDENTIAL SOLUTIONS, LLC
Policy #: 010-48122

Ameritas
fulfilling life.

Vision Plan Benefits

	VSP Choice Network	Out-of-Network
Annual Eye Exam	Covered in full	Up to $45
Single Vision Lenses	Covered in full	Up to $30
Bifocal Lenses	Covered in full	Up to $50
Trifocal Lenses	Covered in full	Up to $65
Lenticular Lenses	Covered in full	Up to $100
Progressive Lenses	See lens options	NA
Frames	$130	$70
Contacts (standard) fit & follow up exam	Member cost up to $60	$0
Contacts (elective)	Up to $130	Up to $105
Contacts (medically necessary)	Covered in full	Up to $ 210

Deductible

Annual Eye Exam	$10	$10
Eyeglass Lenses or Frames	$25	$25

Benefit Frequencies (months)

	Based on Date of Service
Exam/Lens/Frame	12/12/24

Member cost for lens options (May vary by prescription, options chosen and retail location)

Progressive Lenses	Up to provider's contracted fee for lined Bifocal Lenses. The patient is responsible for the difference between the base lens and the progressive lens charge.	Up to Lined Bifocal allowance
Std. Polycarbonate	Covered in full for dependent children $33 adults	No benefit
Solid Plastic Dye	$15 (except Pink I & II)	No benefit
Plastic Gradient Dye	$17	No benefit
Scratch Resistant Coating	$17-$33	No benefit
Anti-Reflective Coating	$43-$85	No benefit
Ultraviolet Coating	$16	No benefit

Monthly Rates

Employee only	$8.88
Employee & Spouse	$19.12
Employee & Child(ren)	$15.44
Employee & Spouse & Child(ren)	$25.68

Rates are effective from 7/1/2023 to 7/1/2024.

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VSP Network

With access to the largest network of independent doctors, VSP members receive services at rates well below walk-in prices at more than 36,000 doctors nationwide. Find a provider at
https://www.vsp.com

Online In-network Options

Eyeconic.com is in-network online eyewear store - which means you won't have to pay the full price now, then wait to be reimbursed later. Your vision benefits will be applied directly to your online order. Eyeconic FAQ:
https:www.vsp.com/eyewear-question.html
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Customer Service

VSP 800-877-7195 www.vsp.com
Mon-Fri 5am-8am, Sat 7am-8pm, Sun 7am-7pm (PST)

Additional Savings

Find More VSP exclusive member savings offers at
https://www.vsp.com/optical-discounts.html

When you visit a VSP network provider you'll save:

- 20% off remaining frame balance
- 20-25% off non-covered lens options such as UV coating & polycarbonate
- 20% off non-covered complete prescription glasses
- 15% off LASIK and PRK laser surgery retail price or
- 5% off promotion price

Based on applicable laws, reduced costs may vary by doctor location.

Laser Vision Surgery

Your vision plan provides an average discount of 15% on LASIK and PRK. Your maximum out-of-pocket per eye is $1,800 for LASIK, $2,300 for custom LASIK using Wavefront technology, and $1,500 for PRK. In order to receive the benefit, a VSP Provide must coordinate the procedure. Getting started is simple; just follow the steps at https://www.vsp.com/lasik.html

Based on applicable laws, reduced costs may vary by doctor location.

Rx Savings

Save on Prescription medications at 60,000 Pharmacies across the nation including CVS, Walgreens, Rite Aid and Walmart. Just Present your Rx savings card. To access and print your Rx savings cards, visit ameritas.com, register/sign in to your secure member account and select member savings. This discount is offered at no additional cost and is not insurance.