A Look at Your VSP Vision Coverage

With VSP and The Dow Chemical Company, your health comes first.



Enroll in VSP[®] Vision Care to get access to savings and personalized vision care from a VSP network doctor for you and your family.

Value and savings you love.

Save on eyewear and eye care when you see a VSP network doctor. Plus, take advantage of Exclusive Member Extras which provide offers from VSP and leading industry brands totaling over \$3,000 in savings.

Provider choices you want.

With private practice doctors and Visionworks retail locations to choose from nationwide, getting the most out of your benefits is easy at a VSP Premier Edge[™] location.



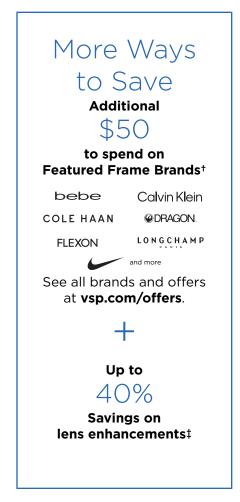
Quality vision care you need.

You'll get great care from a VSP network doctor, including a WellVision Exam[®]. An annual eye exam not only helps you see well, but helps a doctor detect signs of eye conditions and health conditions, like diabetes and high blood pressure.

Using your benefit is easy!

Create an account on **vsp.com** to view your in-network coverage, find the VSP network doctor who's right for you, and discover savings with Exclusive Member Extras. At your appointment, just tell them you have VSP.





Enroll through your employer today. Contact us: **800.877.7195** or **vsp.com**

Your VSP Vision Benefits Summary

The Dow Chemical Company and VSP provide you with an affordable vision plan.

PROVIDER NETWORK:

EFFECTIVE DATE:

VSP Choice

01/01/2025



BENEFIT	DESCRIPTION	COPAY	FREQUENCY					
Your Coverage with a VSP Provider								
WELLVISION EXAM	Focuses on your eyes and overall wellnessRoutine retinal screening	\$0 Up to \$39	Every calendar year					
ESSENTIAL MEDICAL EYE CARE	 Retinal imaging for members with diabetes covered-in-full Additional exams and services beyond routine care to treat immediate issues from pink eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more. Coordination with your medical coverage may apply. Ask your VSP network doctor for details. 	\$20 per exam	Available as needed					
PRESCRIPTION GLASSE	S	\$20	See frame and lenses					
FRAME⁺	 \$200 Featured Frame Brands allowance \$200 Visionworks frame allowance on any frame \$150 frame allowance 20% savings on the amount over your allowance \$150 Walmart/Sam's Club frame allowance \$80 Costco frame allowance 	Included in Prescription Glasses	Every calendar year					
LENSES	 Single vision, lined bifocal, and lined trifocal lenses Impact-resistant lenses for dependent children 	Included in Prescription Glasses	Every calendar year					
LENS ENHANCEMENTS	 Standard progressive lenses Premium progressive lenses Custom progressive lenses UV protection Average savings of 30% on other lens enhancements 	\$0 \$95 - \$105 \$150 - \$175 \$0	Every calendar year					
CONTACTS (INSTEAD OF GLASSES)	\$130 allowance for contacts; copay does not applyContact lens exam (fitting and evaluation)	Up to \$60	Every calendar year					
ADDITIONAL SAVINGS	 Glasses and Sunglasses Discover all current eyewear offers and savings at vsp.com/offers. 20% savings on unlimited additional pairs of prescription or non-prescription glasses/sunglasses, including lens enhancements, from a VSP provider within 12 months of your last WellVision Exam. Laser Vision Correction Average of 15% off the regular price; discounts available at contracted facilities. Exclusive Member Extras for VSP Members Contact lens rebates, lens satisfaction guarantees, and more offers at vsp.com/offers. 							
	 Contact tens reparts, tens satisfaction guarantees, and more oners at vsp.com/orters. Save up to 60% on digital hearing aids with TruHearing[®]. Visit vsp.com/offers/special-offers/hearing-aids for details. Enjoy everyday savings on health, wellness, and more with VSP Simple Values. 							

ERAGE WITH AN OUT-OF-NETWORK PROVID

With so many in-network choices, VSP makes it easy to get the most out of your benefits. You'll have access to preferred private practice, retail, and						
online in-network choices. Log in to vsp.com to find an in-network provider. Your plan provides the following out-of-network reimbursements:						
Exam	up to \$45	Lined Bifocal Lenses	up to \$50	Progressive Lenses	up to \$50	
Frame	up to \$70	Lined Trifocal Lenses	up to \$65	Contacts	up to \$105	
Single Vision Lenses	up to \$30					

[†]Only available to VSP members with applicable plan benefits. Frame brands and promotions are subject to change.

Savings based on doctor's retail price and vary by plan and purchase selection; average savings determined after benefits are applied. Ask your VSP network doctor for more details. +Coverage with a retail chain may be different or not apply.

VSP guarantees member satisfaction from VSP providers only. 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. In the state of Washington, VSP Vision Care, Inc., is the legal name of the corporation through which VSP does business. TruHearing is not available directly from VSP in the states of California and Washington. Premier Edge is not available for some members in the state of Texas.

To learn about your privacy rights and how your protected health information may be used, see the VSP Notice of Privacy Practices on vsp.com.

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