

SEE HEALTHY AND LIVE HAPPY WITH HELP FROM NORTHROP GRUMMAN CORPORATION AND VSP.



Enroll in VSP® Vision Care to get personalized eye care from a VSP network doctor at low out-of-pocket costs.

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 for additional savings.

PROVIDER CHOICES YOU WANT.

With an average of five VSP network doctors within six miles of you, it's easy to find a nearby in-network doctor or retail chain. Plus, maximize your coverage with bonus offers and additional savings that are exclusive to Premier Program locations.

Prefer to shop online? Use your vision benefits on Eyeconic®—the VSP preferred online retailer.

QUALITY VISION CARE YOU NEED.

You'll get great care from a VSP network doctor, including a WellVision Exam®—a comprehensive exam designed to detect eye and health conditions.

VSP EASYOPTIONS

Each member on your plan can personalize their benefit with ease. Choose the upgrade that's right for you! Check out the plan grid to see your options.

GET YOUR PERFECT PAIR

EXTRA \$20

TO SPEND ON FEATURED FRAME BRANDS*

bebe CALVIN KLEIN COLE HAAN FLEXON

LACOSTE WEST

SEE MORE BRANDS AT VSP.COM/OFFERS.

UP TO 40% SAVINGS ON LENS ENHANCEMENTS



Enroll today.

Contact us: 866.463.9954 or vsp.com

YOUR VSP VISION BENEFITS SUMMARY

Description

Benefit

Northrop Grumman Corporation and VSP provide you with a choice of affordable vision plans. Choose the eye care essentials, or upgrade to give your eyes extra love.

PROVIDER NETWORK:

VSP Choice



Description



Copay

Vision Plan Coverage with a VSP Provider Vision Care Plus Plan Coverage with a VSP Provider · Focuses on your eyes and Focuses on your eyes and WellVision WellVision overall wellness \$10 overall wellness \$10 **Exam** Exam · Every calendar year Every calendar year PRESCRIPTION GLASSES PRESCRIPTION GLASSES \$10 \$10 \$150 allowance for a wide selection \$200 allowance for a wide of frames selection of frames \$170 allowance for featured frame \$220 allowance for featured brands Included in Included in frame brands 20% savings on the amount over Frame · 20% savings on the amount over Prescription Frame Prescription your allowance Glasses Glasses vour allowance \$80 Walmart*/Sam's Club*/Costco* • \$110 Walmart®/Sam's Club®/ Costco® frame allowance frame allowance • Every calendar year · Every other calendar year · Single vision, lined bifocal, · Single vision, lined bifocal, and lined trifocal lenses Included in and lined trifocal lenses Included in • Impact-resistant lenses for · Impact-resistant lenses for Lenses Prescription Lenses Prescription dependent children dependent children Glasses Glasses · Every calendar year · Every calendar year Scratch-resistant coating Standard progressive lenses \$0 \$0 • Standard progressive lenses • Premium progressive lenses \$30 \$0 Lens Custom progressive lenses Premium progressive lenses \$95 - \$105 \$30 Lens \$150 - \$175 **Enhancements** Average savings of 20-25% on Custom progressive lenses **Enhancements** other lens enhancements Average savings of 20-25% on · Every calendar year other lens enhancements • Every calendar year • \$130 allowance for contacts; copay Contacts • \$200 allowance for contacts; does not apply · Contact lens exam (fitting and copay does not apply (instead Up to \$60 Contacts Contact lens exam (fitting and Up to \$60 of glasses) evaluation) (instead · Every calendar year of glasses) evaluation) · Every calendar year • An additional \$50 frame allowance, or Fully covered premium or **VSP** custom progressive lenses, or **EASYOPTIONS** · Fully covered light-reactive Included in Prescription lenses, or · Fully covered anti-glare Glasses coating, or An additional \$50 contact lens allowance · Every calendar year • Retinal screening for members with diabetes \$0 · Additional exams and services for members with diabetes, glaucoma, or age-related macular \$10 per exam degeneration PRIMARY Treatment and diagnoses of eye conditions, including pink eye, vision loss, and cataracts available for all \$10 per exam EYECARE" members

Copay

Benefit

Glasses and Sunglasses

details · As needed

- Extra \$20 to spend on featured frame brands. Go to vsp.com/offers for details
- · 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP provider within 12 months of vour last WellVision Exam

EXTRA SAVINGS

Routine Retinal Screening

· No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam

· Limitations and coordination with your health medical coverage may apply. Ask your VSP doctor for

Average 15% savings on the regular price or 5% savings on the promotional price; discounts only available from contracted facilities

YOUR COVERAGE WITH OUT-OF-NETWORK PROVIDERS

Get the most out of your benefits and greater savings with a VSP network doctor. Call Member Services for out-of-network plan details.

Coverage with a retail chain may be different or not apply. EasyOptions Plan Benefits are not available at Walmart, Sam's Club, or Costco. VSP guarantees coverage 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

*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.