Vision Plan

Highlights

You automatically receive vision coverage if you participate in an Archdiocese of Baltimore medical plan. Coverage is provided by VSP, and you can use any provider you choose. However, if you use a VSP provider, you will receive a higher level of benefits.

A similar vision plan is also available to benefits eligible employees and dependents who do not participate in an Archdiocese of Baltimore medical plan.

The plan covers one eye exam every 12 months, one pair of eyeglass frames and spectacle lenses or contact lenses are also covered once every 12 months. The following chart provides more detail regarding vision benefits.

Vision Plan		
Benefit	Plan Pays	
	VSP Provider	Non-VSP Provider
Eye Exam (once every 12 months)	100% after \$15 copay	Up to \$52 allowance
Lenses – each pair (once every 12 months) – Single vision – Lined bifocal – Lined trifocal	100%	Single vision: up to \$55 allowance Lined bifocal: up to \$75 allowance Lined trifocal: up to \$95 allowance
Frames (once every 12 months)	Up to \$130 allowance	Up to \$57 allowance
Contacts lenses – each pair (once every 12 months)	Up to \$125 allowance; Copay applies for contact lens exam (fitting and evaluation); Copay not to exceed \$60	Up to \$125 allowance Contact exam not covered

Discounts are available for laser vision correction, sunglasses, and other lens options such as scratch-resistant and anti-reflective coatings.

For more information about vision coverage, call VSP at 1-800-877-7195 or go to www.vsp.com.

Cost of Coverage

If you participate in an Archdiocese of Baltimore medical plan, the cost of vision coverage is included in your medical plan coverage. If you are interested in electing a stand-alone vision plan, please see your direct employer for the cost of your 2017-2018 coverage.