

WellVision Fxam

Benefit



DeltaVision® by Delta Dental of Kentucky

administered by VSP®

Copay

DeltaVision 150 Plus

Description

Well vision Exam		
Exams 1 exam every 12 months	Comprehensive eye exam to ensure overall visual wellness	\$10
Prescription Glasses		\$10
Frames 1 pair every 24 months	\$150 allowance for wide selection of frames 20% savings on amount over allowance \$80 Costco, Walmart/Sam's Club frame allowance	Included in Prescription Glasses Copay
Lenses 1 pair every 12 months	Single vision, lined bifocal and lined trifocal lenses Polycarbonate lenses for children & adults	Included in Prescription Glasses Copay
Covered Lens Enhancements	Standard Progressive Lenses Standard Scratch Resistant Coating UV Screening Solid or Gradient Tint Standard Anti-Reflective Coating	Covered in full
Optional Lens Enhancements	Premium Progressive Lenses Custom Progressive Lenses Average savings of 30% on other lens enhancements	\$95 - \$105 \$150 - \$175
Contact Lenses - instead o	f glasses	
Contacts every 12 months	\$150 allowance for contacts; copay does not apply Contact lens exam (fitting and evaluation)	up to \$60
Extra Savings		

	any VSP provider within 12 months of your last WellVision Exam
Retinal Screening	No more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam

Glasses and Sunglasses | 20% savings on additional glasses and sunglasses, including lens enhancements, from

Laser Vision Correction Average 15% - 20% discount

Additional Programs

Featured Frames

Included | Primary Eyecare, Eye Health Management (including Diabetic Exam Reminder Letters)

\$170 allowance on featured frame brands. Check vsp.com for current offers.

Your coverage with Out-of-Network Providers

Exam - up to \$45

Frame - up to \$70

Lined Bifocal Lenses - up to \$50

Lined Trifocal Lenses - up to \$65

Single Vision Lenses - up to \$30

Lenticular Lenses - up to \$100

Progressive Lenses - up to \$50

Contacts - up to \$105

Necessary Contact Lenses - up to \$210

Member Services*

Delta Dental of Kentucky

Customer Service 800-955-2030

*Please contact DDKY for eligibility before contacting VSP Member Services

VSP Vision

Member Services 800-877-7195

Hearing impaired customers may call 800-428-4833

VSP Choice Network