UC Davis Health System (UCDHS)
Resident Medical Staff
VISION PLAN BENEFIT SUMMARY
Effective July 1, 2005

Provided by Vision Service Plan (Group #12170630) Division 0085
VSP Customer Service: (800) 877-7195
Web address: www.vsp.com

• Enrollment in this coverage is automatic. If you wish to opt-out of this insurance plan, please contact the Resident/Fellow Program at 734-6387
• UC DMC pays the total monthly premium; you are responsible for necessary co-payments.
• VSP will cover your visit to a UCDMC ophthalmologist.
• Your VSP provider takes care of paperwork for authorizations.

COVERED EXPENSES if a VSP provider is used (if a non-VSP provider is used, your cost will be more):

Routine examination every 12 months, covered in full after a $10 co-pay

Materials:
- Lenses every 12 months & frames every 24 months after a $25 co-pay; frame allowance = $15.00
- Contact lenses every 12 months (contact lenses are in lieu of lenses and frame)
  - If necessary: lenses covered in full, with $25 materials co-pay
  - If elective: $10 allowance toward comprehensive exam, contact lens evaluation fee, fitting costs and materials; no co-pay

Discounts available for cosmetic lens enhancements, additional or replacement pairs of glasses and laser correction surgery

Low Vision Benefits:
- Supplementary testing, covered in full
- Necessary supplemental care, 75% of cost for authorized benefits
- Benefit maximum is $1,000 every two years

NOT COVERED (partial list):
• Cosmetic materials
• Corrective treatment of an experimental nature
• Replacement of lost or broken frames or lenses

Please notify Resident Program Human Resources unit of any change in family status, i.e., birth, marriage, adoption, divorce, over-age child.

This information is a brief description of important features of your insurance plan. In case of a conflict with the contract, the terms of the contract apply.

For questions or problem resolution, contact UCDHS Human Resources: Resident/Fellow Program: Femi Murphy at (916) 734-3418 or Erinda Margarite at (916) 734-2756.

Revised 7/1/05