



# Enrollment Form with Dependent Data

Name of group (employer): Patco Electrical Services, Inc.

Employee last name, first name, middle initial: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Gender:  male  female

Date of birth (month/date/year): \_\_\_\_\_

- Type of coverage selected:
- employee only
  - employee and one dependent
  - employee and children
  - employee and family
  - waive coverage

\* **Dependent Relationship:** S=spouse, C=child, H=handicapped child, T=student

dependent last name	dependent first name	gender	* Dependent Relationship	date of birth mm/dd/yyyy
			<input type="checkbox"/> S <input type="checkbox"/> C <input type="checkbox"/> H <input type="checkbox"/> T	/ /
			<input type="checkbox"/> S <input type="checkbox"/> C <input type="checkbox"/> H <input type="checkbox"/> T	/ /
			<input type="checkbox"/> S <input type="checkbox"/> C <input type="checkbox"/> H <input type="checkbox"/> T	/ /
			<input type="checkbox"/> S <input type="checkbox"/> C <input type="checkbox"/> H <input type="checkbox"/> T	/ /
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			<input type="checkbox"/> S <input type="checkbox"/> C <input type="checkbox"/> H <input type="checkbox"/> T	/ /
			<input type="checkbox"/> S <input type="checkbox"/> C <input type="checkbox"/> H <input type="checkbox"/> T	/ /

Employee Signature: \_\_\_\_\_

Please return this form to your benefits administrator. Do not return to VSP.

# Your VSP Vision Benefits Summary

Automatically get an extra \$20 to spend when you choose a featured frame brand like bebe®, ck Calvin Klein, Flexon®, Lacoste, Michael Kors, Nike, Nine West, and more. Visit [vsp.com](http://vsp.com) to find a doctor who carries these brands.

**VSP Coverage Effective Date:** 09/01/2014  
**VSP Doctor Network:** VSP Choice

Visit [vsp.com](http://vsp.com) for more details on your vision benefit and for exclusive savings and promotions for VSP members.

Benefit	Description	Copay	Frequency	
<b>Your Coverage with a VSP Doctor</b>				
<b>WellVision Exam</b>	• Focuses on your eyes and overall wellness	\$10	Every 12 months	
<b>Prescription Glasses</b>		\$25	See frame and lenses	
<b>Frame</b>	• \$130 allowance for a wide selection of frames • \$150 allowance for featured frame brands • 20% savings on the amount over your allowance	Included in Prescription Glasses	Every 24 months	
<b>Lenses</b>	• Single vision, lined bifocal, and lined trifocal lenses • Polycarbonate lenses for dependent children	Included in Prescription Glasses	Every 12 months	
<b>Lens Enhancements</b>	• Standard progressive lenses • Premium progressive lenses • Custom progressive lenses • Average savings of 20-25% on other lens enhancements	\$55 \$95 - \$105 \$150 - \$175	Every 12 months	
<b>Contacts (instead of glasses)</b>	• \$130 allowance for contacts; copay does not apply • Contact lens exam (fitting and evaluation)	Up to \$60	Every 12 months	
<b>Extra Savings</b>	<p><b>Glasses and Sunglasses</b></p> <ul style="list-style-type: none"> <li>• Extra \$20 to spend on featured frame brands. Go to <a href="http://vsp.com/specialoffers">vsp.com/specialoffers</a> for details.</li> <li>• 20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP doctor within 12 months of your last WellVision Exam.</li> </ul> <hr/> <p><b>Laser Vision Correction</b></p> <ul style="list-style-type: none"> <li>• Average 15% off the regular price or 5% off the promotional price; discounts only available from contracted facilities</li> </ul>			
<b>Your Monthly Contribution</b>	\$8.73 Member only	\$13.97 Member + 1	\$14.26 Member + children	\$22.99 Member + family

## Your Coverage with Other Providers

Visit [vsp.com](http://vsp.com) for details, if you plan to see a provider other than a VSP doctor.

Exam.....up to \$45	Single Vision Lenses.....up to \$30	Lined Trifocal Lenses.....up to \$65	Contacts.....up to \$105
Frame.....up to \$70	Lined Bifocal Lenses.....up to \$50	Progressive Lenses.....up to \$50	

VSP guarantees coverage from VSP doctors 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.

Enroll in VSP today.  
 You'll be glad you did.  
 Contact us. [vsp.com](http://vsp.com)  
 800.877.7195

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