

2025 Voluntary Vision Benefits

Saint Louis University vision benefits are offered through VSP. See below chart for plan design.

| BENEFIT | IN-NETWORK | OUT-OF-NETWORK |
|-----------------------------------|---|-----------------------|
| Exam | \$10 Copay | Up To \$45 Allowance |
| Lenses | | |
| Single | \$10 Copay | Up To \$30 Allowance |
| Bifocal | \$10 Copay | Up To \$50 Allowance |
| Trifocal | \$10 Copay | Up To \$65 Allowance |
| Frames | \$150 Allowance For A Wide Selection Of Frames; \$170 Allowance For Featured Frame Brands; 20% Discount On The Amount Over Your Balance | Up To \$70 Allowance |
| Contact Lenses Instead of Glasses | \$150 Allowance For Contacts And Lenses Exam (Fitting And Evaluation) | Up To \$105 Allowance |
| Frequency | | |
| Exams, Lenses, Frames | Every Calendar Year | |
| Frames | Every Other Calendar Year | |
| MONTHLY PER-PAYCHECK DEDUCTIONS | | |
| Employee Only | \$7.02 | |
| Employee + Spouse | \$12.76 | |
| Employee + Child(ren) | \$13.38 | |
| Family | \$20.66 | |
| BI-WEEKLY PER-PAYCHECK DEDUCTIONS | | |
| Employee Only | \$3.24 | |
| Employee + Spouse | \$5.89 | |
| Employee + Child(ren) | \$6.18 | |
| Family | \$9.54 | |

NOTE: ID Card not required for vision services.