

**Member:**



**Coverage Type:**

**Client ID:**

**Doctor Network:**

**Copays:**

For more about your coverage  
visit [vsp.com](http://vsp.com), or call 800.877.7195.

xx/xx/xxxx

## Using your VSP® benefit is easy.

- Find the eyecare provider who's right for you.  
To find a VSP doctor, visit **[vsp.com](http://vsp.com)** or call **800.877.7195**.
- Review your benefit information at [vsp.com](http://vsp.com) before your appointment.
- At your appointment, tell them you have VSP.

**My Eyecare Provider:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

This card is not required for service and does not guarantee benefit eligibility. It is for use by VSP members. In the event of a conflict between this information and your organization's contract with VSP, the terms of the contract will prevail.

Utah members, your VSP coverage is provided by Vision Service Insurance Plan Company and is regulated by the State of Utah Insurance Division.