



2025 - 2026

Alpine School District

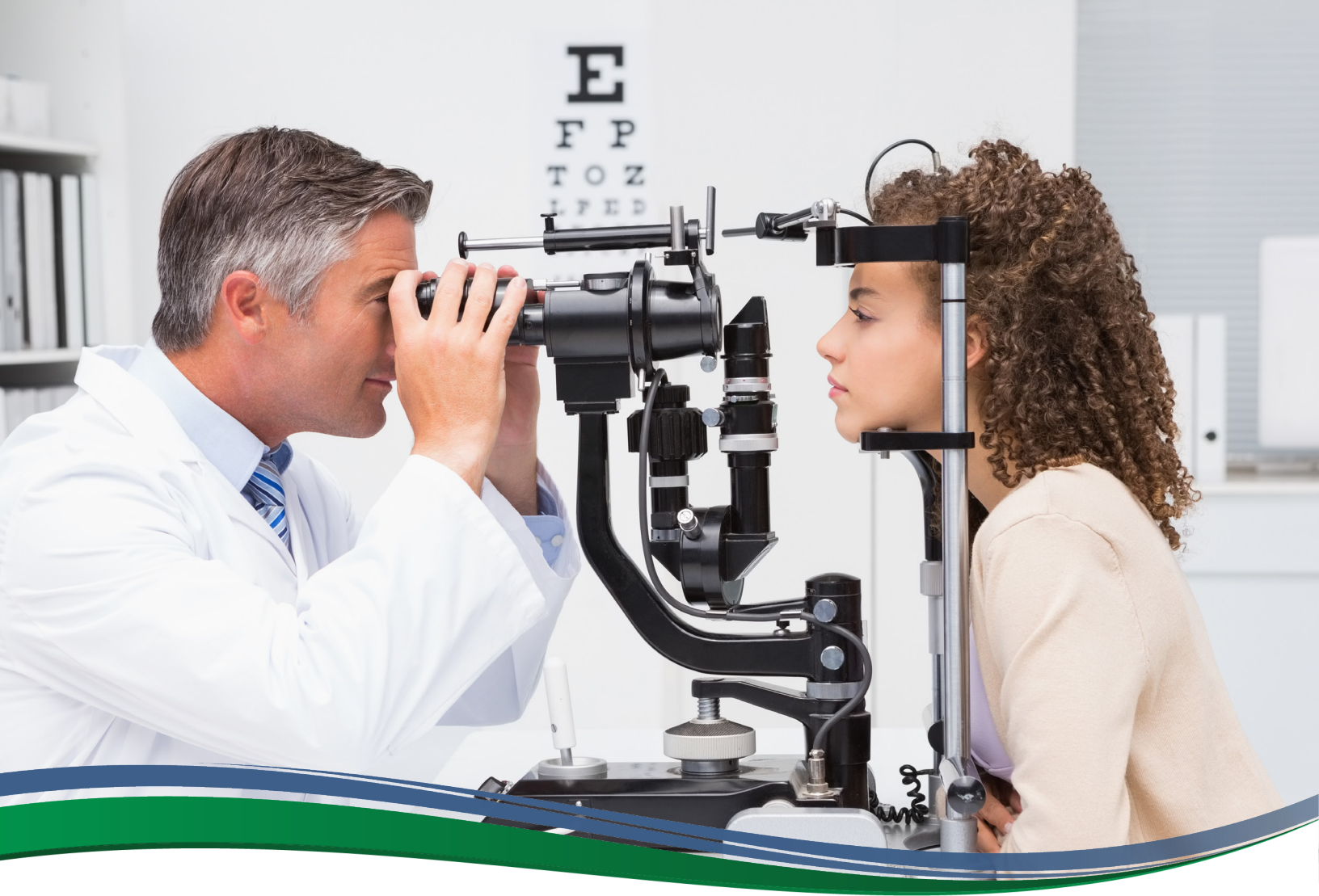
Voluntary Vision Enrollment Guide | VSP

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**Know your plan,
know your options.**

Visit alpine.emihealth.com/vision for helpful resources.



Your vision plan network.

Why vision care matters:

Your eyesight affects more than just how well you see. It impacts your daily comfort, your ability to work, and your overall health. Regular eye exams can catch vision changes early and may even help detect other health issues. That's why EMI Health offers vision coverage that supports your well-being without high out-of-pocket costs.

With the VSP network, you can choose from a wide range of providers and retailers, making it easy to get the care you need, wherever you are.

YOUR VISION PLAN NETWORK

What's typically included with vision.

While plan details vary, most vision plans include:

Eye Exams

Routine exams every 12 months with a low in-network copay

Lenses

Single vision, bifocal, trifocal, and progressive lenses. As well as optional lens enhancements like anti-scratch, anti-reflective, and UV protection available at discounted copays

Frames or Contacts

An allowance toward frames or contact lenses as well as different allowance amounts depending on whether you shop through a VSP network provider or a retail partner

Laser Vision Correction

Discounts on LASIK or PRK surgery through participating providers



Check your plan for key details:

Your employer may offer different levels of vision coverage. To review your plan option(s):

- Look at the back of your enrollment booklet.
- Or log into your EMI Health member portal after enrollment.

Your vision benefits with VSP

EMI Health partners with VSP, the nation's largest vision insurance provider, to give you easy, affordable access to eye care. All EMI Health vision plans use the VSP Choice Plus Network, which includes a wide range of providers and retailers nationwide.

Nationwide Retailers:

- Walmart Vision Center
- Costco Optical
- Sam's Club
- Visionworks
- Eyemart Express
- Independent eye doctors across the country
- Eyeconic.com (VSP's official online store for glasses, sunglasses, and contacts)



YOUR VISION PLAN NETWORK

How to search for a vision provider:

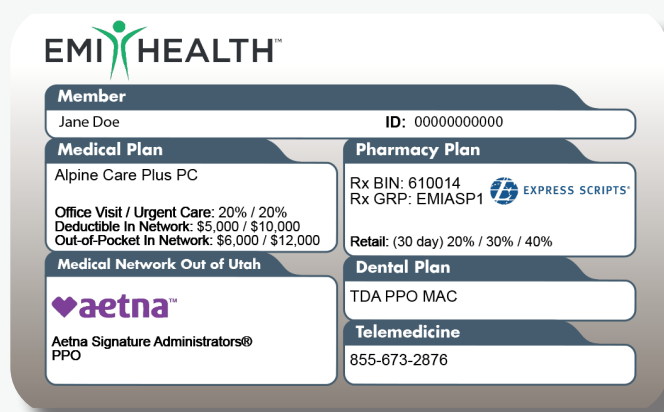
You can search for in-network doctors, clinics, and specialists at any time, even if you have not enrolled yet. Use the provider search tool as a guest to explore networks, or sign in as a member to see results based on your plan.

For Guests:

- Go to **emihealth.com**
- Click on **Provider Search**.
- Choose **Search as a Guest**.
- **Click the Vision tab.**
- Enter your network, state, and zip code.
- Search for your provider.

For Members:

- Go to **emihealth.com/account**.
- Login with your credentials.
- Click **Provider Search** under your vision plan within your member dashboard.
- Your network, state, and zip code is automatically displayed.
- Search for a provder.



Watch for your Member ID Card.

After you enroll, EMI Health will mail you a Member ID card. This card includes your member ID number, plan name, and network — all the details you'll need to access care and register your online account.

Once your card arrives, be sure to activate your EMI Health account. You'll use the information on your card to log in, view benefits, find providers, and manage your coverage. To activate your account and access your dashboard go to **emihealth.com/account** and click register.

YOUR VISION PLAN NETWORK

How to find the Provider Network in your vision plan summary:

The Provider Network is found under Network/Reimbursement Schedule of each plan summary. If you have any questions about your plan, please contact your HR representative.

Network	VSP Choice	N/A
Well Vision Exam	Covered 100%	Up to \$45
Lenses (Glass or Plastic)		

Provider Network

Your network name tells you which doctors, hospitals, and healthcare providers are considered in-network. Choosing in-network providers helps you get the most from your benefits and avoid higher out-of-pocket costs.

YOUR VISION PLAN NETWORK

Plan: Vision

Network: VSP Choice

	In-Network	Out-of-Network
Network	VSP Choice	N/A
	In-Network benefits not applicable at Costco, Sam's, Walmart or at retail affiliates. Members may access these locations OON.	
Well Vision Exam	Up to \$32	Up to \$32
Lenses (Glass or Plastic)		
Single Vision	Up to \$25	Up to \$25
Lined Bifocal	Up to \$38	Up to \$38
Lined Trifocal	Up to \$50	Up to \$50
Lined Lenticular	Up to \$105	Up to \$105
Lens Options		
Progressive (standard no-line)	20% Discount	Up to \$38 (In lieu of Lined Bifocal reimbursement)
Premium Progressive Options	20% Discount	
Custom Progressive Options	20% Discount	
Plastic Gradient Dye	20% Discount	
Solid Plastic Dye	20% Discount	N/A
Photochromic Lenses	20% Discount	
Polycarbonate for Adults	20% Discount	
Polycarbonate for Children (under 18)	20% Discount	
Coatings		
Scratch Resistant Coating	20% Discount	N/A
Anti-Reflective Coating	20% Discount	
UV Protection	20% Discount	
Frames		
Allowance Based on Retail Pricing	Up to \$42 (plus 20% discount frame)	Up to \$42
Additional Pairs of Glasses**	Up to 20% Off Retail	N/A
Elective Contact Lenses In Lieu of Frame & Lenses		
	\$150 Allowance towards contact lens fitting and evaluation services and contacts 15% discount on fitting and evaluation services, excluding materials	\$150 Allowance
Frequency		
Exam, Lenses, Frame or Contacts	Exam every 12 months, Lenses and Frames or Contacts every 24 months	
Refractive Surgery		
LASIK***	Yes	N/A
Monthly Rates	Voluntary	
Employee	\$3.60	
Two Party	\$6.90	
Family	\$11.20	

Notes
This is a summary of plan benefits. The actual Policy will detail all plan limitations and exclusions.
** 20% discount off unlimited additional pairs of glasses offered through any VSP Choice Providers within 12 months of last covered eye exam.
*** Discounts average 15-20% off or 5% off a promotional offer for laser surgery, including PRK, LASIK, Custom LASIK, and IntraLase3

Underwritten by: Educators Mutual Insurance Association

YOUR VISION PLAN NETWORK

Plan: Vision

Network: VSP Enhanced Choice

	In-Network	Out-of-Network
Network	VSP Choice	N/A
Well Vision Exam	Covered 100%	Up to \$45
Lenses (Glass or Plastic)		
Single Vision	Covered 100%	Up to \$30
Lined Bifocal	Covered 100%	Up to \$50
Lined Trifocal	Covered 100%	Up to \$65
Lens Options ¹		
Progressive (standard no-line)	\$0 Co-pay	Up to \$50 (In lieu of Lined Bifocal reimbursement)
Premium Progressive Options	\$95-\$105 Co-pay, then covered 100%	
Custom Progressive Options	\$150-\$175 Co-pay, then covered 100%	
Plastic Gradient Dye	\$17 Co-pay, then covered 100%	N/A
Solid Plastic Dye	\$15 Co-pay, then covered 100%	
Photochromic Lenses	\$75 Co-pay, then covered 100%	
Polycarbonate for Adults	\$31 Co-pay Single Vision, then covered 100% \$35 Co-Pay Multifocal, then covered 100%	
Polycarbonate for Children (under 18)	Covered 100%	
Coatings ¹		
Scratch Resistant Coating	\$17 Co-pay, then covered 100%	N/A
Anti-Reflective Coating	\$41 Co-pay, then covered 100%	
UV Protection	\$16 Co-pay, then covered 100%	
Additional lens enhancements	20-25% Discount ***	
Frames		
Allowance Based on Retail Pricing	\$65 Allowance at any VSP doctor plus 20% off any frame overage . \$35 Allowance at Costco, Sam's and Walmart ***	Up to \$50
Additional Pairs of Glasses**	Up to 20% Off Retail	N/A
Elective Contact Lenses In Lieu of Frame & Lenses		
	\$100 Allowance towards contact lens fitting and evaluation fee and contact lens. 15% discount off of contact lens fitting and evaluation fee, excluding materials ***	Up to \$85
Frequency		
Exam, Lenses, Frame or Contacts	Exam Every 12 months. Lenses/Frame or Contacts every 24 months	
Refractive Surgery		
LASIK***	Average 15% off or 5% off promotional offer	N/A
Monthly Rates	Voluntary	
Employee	\$5.10	
Two Party	\$10.20	
Family	\$16.40	

Notes		
This is a summary of plan benefits. The actual Policy will detail all plan limitations and exclusions.		
** 20% discount off unlimited additional pairs of glasses offered through any VSP Choice Providers within 12 months of last covered eye exam.		
*** Discounts average 15-20% off or 5% off a promotional offer for laser surgery, including PRK, LASIK, Custom LASIK, and IntraLase3		

***No additional discounts from Costco, Walmart or Sam's providers

¹Lens options and coatings coverages are not applicable at Costco, Walmart and Sam's Club
Underwritten by: Educators Mutual Insurance Association

Everything at your fingertips!



Online Tools

Our secure member website is your one-stop shop for information about your healthcare benefits. Access all our online tools by going to emihealth.com/account.

- Member Dashboard
- View/Print ID Cards
- Plan Information and Provider Search
- Accumulators for each plan member and family
- Recent Claims
- Programs and Tools



On the go? Download our app!

Download the free EMI Health app to access your account for your healthcare information and online tools.



How to Register your account:

After you enroll and receive your Member Card ID:

- Go to **emihealth.com/account**.
- Click **Register Account**.
- Choose **Member** and follow the step-by-step instructions.

When you register your account, you'll have access to your member dashboard, plan information, added benefits and more!



BenefitHub

As a member of EMI Health, you can get deals on things you purchase every day.

Tickets, concerts, theaters, restaurants, and thousands of other local offers are yours simply because you are awesome (and covered by EMI Health). Learn more by visiting to emihealth.com.



EMI Health Contact Information

MAIN WEBSITE
emihealth.com

PHONE NUMBER
(800) 662 - 5850

HOURS
MON-FRI
6:00am - 6:00pm MST

We're here to help.

Health insurance doesn't have to be complicated. We can help you with everything from understanding your benefits to finding the right doctor. Our customer services teams are dedicated to providing exceptional service.

TERMS AND CONDITIONS

Informational Use Only

This guide is intended to summarize key features of your EMI Health benefits. It is not a contract and does not create any legal rights or entitlements.

Plan Documents Govern

In case of any discrepancies between this booklet and official plan documents—including the Summary Plan Description (SPD), Certificate of Coverage, or member handbook—the plan documents will govern. Copies of those documents are available through your employer or EMI Health.

Subject to Change

Plan details, networks, costs, and availability are subject to change based on employer selections, legislative updates, or administrative decisions. EMI Health reserves the right to amend or terminate coverage in accordance with applicable law.

Eligibility and Enrollment

You must meet eligibility requirements to enroll in a plan. Outside of open enrollment, coverage changes require a qualifying life event and must be submitted within your employer's required timeframe—typically within 30 or 31 days.

Privacy and Security

EMI Health complies with federal privacy regulations to safeguard your personal health information. For our full privacy practices, visit emihealth.com/privacy to learn more.

