

Amendment 1 to Group Vision Request for Proposal

Questions RE: Request for Proposal Group Vision Coverage

- 1) Were there any plan changes throughout the experience periods provided?

No

- 2) Please provide more information on what procedures are covered under the Diabetic Eyecare Plus Program. The Evidence of Coverage provides examples of symptoms and conditions which may result in a covered person seeking services under the program but it doesn't provide any detail on exactly what is covered under the plan other than an eye examination and "special ophthalmological services". On page 16, under Exclusions and Limitations, it says "A current list of these procedures will be made available to Covered Persons upon request". Is it possible to receive a copy of the list of covered procedures?

The VSP Diabetic Eyecare Plus ProgramSM provides coverage of additional eyecare services specifically for members with diabetic eye disease, glaucoma or age-related macular degeneration (AMD). Eligible members can receive both routine and follow-up medical eyecare from their VSP doctor—the doctor who already knows their eyes best.

- The VSP Diabetic Eyecare Plus Program provides coverage of additional eyecare services specifically for members with diabetic eye disease, glaucoma or AMD, including:
 - medical follow-up exams,
 - visual field and acuity tests,
 - specialized screenings and diagnostic tests,
 - diagnostic imaging of the retina and optic nerve,
 - retinal screening for eligible members with diabetes.
- The program also provides supplemental coverage for non-surgical medical eye conditions such as diabetic retinopathy, abnormal blood vessel growth on the eye (rubeosis), and diabetic macular edema.
- Members can self-refer, visit their VSP Provider as often as needed, and pay only a copay for services.