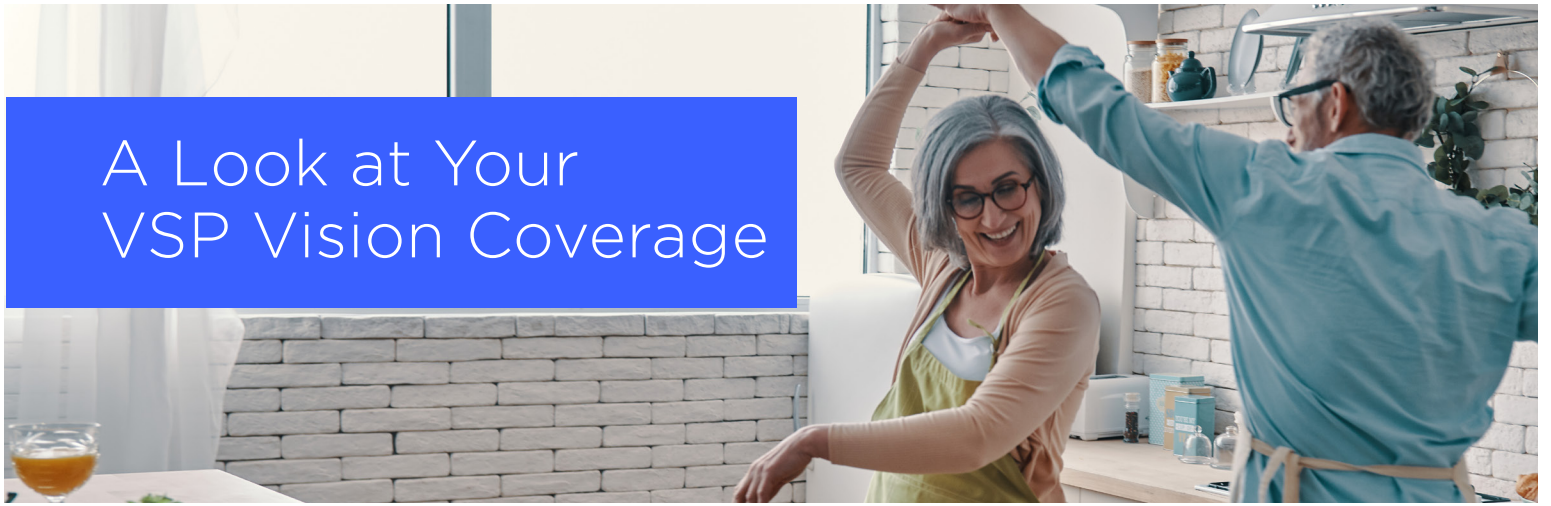


A Look at Your VSP Vision Coverage



With VSP and the State of California, your health comes first.

As a VSP® member, you get access to savings and personalized vision care from a VSP network doctor for you and your family.

Value and savings you love.

Save on eyewear and eye care when you see a VSP network doctor. Plus, take advantage of Exclusive Member Extras which provide offers from VSP and leading industry brands totaling over \$3,000 in savings.

Provider choices you want.

Maximize your benefits at a **Premier Program** location, including thousands of **private practice doctors** and over 700 **Visionworks® retail locations** nationwide.

Shop online and connect your benefits.

Eyeconic® is the preferred VSP online retailer where you can shop in-network with your vision benefits. See your savings in real time when you shop over 70 brands of contacts, eyeglasses, and sunglasses.

Quality vision care you need.

You'll get great care from a VSP network doctor, including a WellVision Exam®. An annual eye exam not only helps you see well, but helps a doctor detect signs of eye conditions and health conditions, like diabetes and high blood pressure.

vsp
vision care



Look into the
VSP Premier
Plan and Enjoy
Enhanced
Coverage!

Upgrade your plan to enjoy a higher allowance for glasses or contacts. Plus, get additional coverage for lens enhancements. See the back page for details.

More Ways to Save

Extra \$20
to spend on
Featured Frame Brands*

bebe CALVIN KLEIN COLE HAAN FLEXON
LACOSTE   NINE WEST

See all brands and offers at vsp.com/offers.



UP
TO 40%
SAVINGS ON LENS
ENHANCEMENTS**



Questions?

Contact us: **800.400.4569** or stateofcaretiree.vspforme.com

Retiree Coverage Under the State of California

The State of California and VSP provide you with an affordable vision plan. Choose the eye care essentials with the Basic Plan or upgrade to the Premier Plan to give your eyes extra love.

Provider Network:

Basic Plan: Advantage

Premier Plan: Choice

Effective Date:

01/01/2023



BENEFIT	DESCRIPTION	COPAY
BASIC PLAN Coverage with a VSP Provider		
WELLVISION EXAM	<ul style="list-style-type: none"> Focuses on your eyes and overall wellness Routine retinal imaging Every calendar year 	\$10 Up to \$39
ESSENTIAL MEDICAL EYE CARE	<ul style="list-style-type: none"> Retinal imaging for members with diabetes covered-in-full Additional exams and services beyond routine care to treat immediate issues from pink eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more. Coordination with your medical coverage may apply. Ask your VSP network doctor for details. Available as needed 	\$5 per exam

PRESCRIPTION GLASSES		
FRAME⁺	<ul style="list-style-type: none"> \$170 Featured Frame Brands allowance \$150 frame allowance 20% savings on the amount over your allowance \$80 Walmart/Sam's Club/Costco frame allowance Every calendar year 	\$25
LENSES	<ul style="list-style-type: none"> Single vision, lined bifocal, and lined trifocal lenses Impact-resistant lenses for dependent children Every calendar year 	
LENS ENHANCEMENTS	<ul style="list-style-type: none"> Light-reactive lenses Impact-resistant lenses for adults Standard progressive lenses Premium progressive lenses Custom progressive lenses Average savings of 20-25% on other lens enhancements Every calendar year 	\$0 \$31 - \$35 \$55 \$95 - \$105 \$150 - \$175

CONTACTS (INSTEAD OF GLASSES)	<ul style="list-style-type: none"> \$110 allowance for contacts and contact lens exam (fitting and evaluation) 15% savings on a contact lens exam (fitting and evaluation) Every calendar year 	\$0
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ADDITIONAL SAVINGS	Glasses and Sunglasses	<ul style="list-style-type: none"> Discover all current eyewear offers and savings at vsp.com/offers. 20% savings on unlimited additional pairs of prescription or non-prescription glasses/sunglasses, including lens enhancements, from a VSP provider within 12 months of your last WellVision Exam.
	Laser Vision Correction	<ul style="list-style-type: none"> Average of 15% off the regular price; discounts available at contracted facilities.
	Exclusive Member Extras	<ul style="list-style-type: none"> Save up to 60% on digital hearing aids with TruHearing. Visit vsp.com/offers/special-offers/hearing-aids for details. Contact lens rebates, lens satisfaction guarantees, and more offers at vsp.com/offers. Everyday savings on entertainment, health and wellness, travel, and more with VSP Simple Values.

YOUR MONTHLY PREMIUM	\$5.82 Retiree only \$11.18 Retiree + one	\$12.03 Retiree + family
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BENEFIT	DESCRIPTION	COPAY
PREMIER PLAN Coverage with a VSP Provider		
WELLVISION EXAM	<ul style="list-style-type: none"> Focuses on your eyes and overall wellness Routine retinal imaging Every calendar year 	\$10 Up to \$39
ESSENTIAL MEDICAL EYE CARE	<ul style="list-style-type: none"> Retinal imaging for members with diabetes covered-in-full Additional exams and services beyond routine care to treat immediate issues from pink eye to sudden changes in vision or to monitor ongoing conditions such as dry eye, diabetic eye disease, glaucoma, and more. Coordination with your medical coverage may apply. Ask your VSP network doctor for details. Available as needed 	\$5 per exam

PRESCRIPTION GLASSES		
FRAME⁺	<ul style="list-style-type: none"> \$270 Featured Frame Brands allowance \$250 frame allowance 20% savings on the amount over your allowance \$135 Walmart/Sam's Club/Costco frame allowance Every calendar year 	\$10
LENSES	<ul style="list-style-type: none"> Single vision, lined bifocal, and lined trifocal lenses Impact-resistant lenses for dependent children Every calendar year 	
LENS ENHANCEMENTS	<ul style="list-style-type: none"> Light-reactive lenses Impact-resistant lenses for adults Standard progressive lenses Premium progressive lenses Custom progressive lenses Average savings of 30% on other lens enhancements Every calendar year 	\$0 \$15 \$0 \$40 - \$50 \$95 - \$120

CONTACTS (INSTEAD OF GLASSES)	<ul style="list-style-type: none"> \$200 allowance for contacts and contact lens exam (fitting and evaluation) 15% savings on a contact lens exam (fitting and evaluation) Every calendar year 	\$0
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YOUR MONTHLY PREMIUM	\$15.55 Retiree only \$30.66 Retiree + one	\$33.34 Retiree + family
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YOUR COVERAGE GOES FURTHER IN-NETWORK

With so many in-network choices, VSP makes it easy to get the most out of your benefits. You'll have access to preferred private practice, retail, and online in-network choices. Log in to vsp.com to find an in-network provider.

*Only available to VSP members with applicable plan benefits. Frame brands and promotions are subject to change.
 **Savings based on doctor's retail price and vary by plan and purchase selection; average savings determined after benefits are applied. Ask your VSP network doctor for more details.
 *Coverage with a retail chain may be different or not apply.
 VSP guarantees member satisfaction from VSP providers 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. In the state of Washington, VSP Vision Care, Inc., is the legal name of the corporation through which VSP does business. TruHearing is not available directly from VSP in the states of California and Washington.
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 All other brands or marks are the property of their respective owners. 105195 VCCM
 Classification: Restricted