

Your VSP Benefits Summary

With a VSP plan through ALAMEDA COUNTY EMPLOYEES' RETIREMENT ASSOCIATION, you get affordable vision coverage for glasses, contacts, and more.

Provider Network:

VSP Choice

Effective Date:

02/01/2027



BENEFIT	DESCRIPTION	COPAY
BASE PLAN Coverage with a VSP Doctor		
WELLVISION EXAM	- Focuses on your eyes and overall wellness - Routine retinal screening - Every 12 months	\$0 Up to \$39
ESSENTIAL MEDICAL EYE CARE	- 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	\$20 per exam

PRESCRIPTION GLASSES		\$25
FRAME*	\$195 Featured Frame Brands allowance \$175 frame allowance 20% savings on the amount over your allowance \$95 Walmart/Sam's Club/Costco frame allowance - Every 24 months	Included in Prescription Glasses
LENSES	- Single vision, lined bifocal, and lined trifocal lenses - Every 12 months	Included in Prescription Glasses
LENS ENHANCEMENTS	- Standard progressive lenses - Premium progressive lenses - Custom progressive lenses - Impact-resistant lenses - UV protection - Average savings of 30% on other lens enhancements - Every 12 months	\$0 \$95 - \$105 \$150 - \$175 \$0 \$0
CONTACTS (INSTEAD OF GLASSES)	\$105 allowance for contacts and contact lens exam (fitting and evaluation) 15% savings on a contact lens exam (fitting and evaluation) - Every 12 months	\$0

BENEFIT	DESCRIPTION	COPAY
BUY UP PLAN Coverage with a VSP Doctor		
WELLVISION EXAM	- Focuses on your eyes and overall wellness - Routine retinal screening - Every 12 months	\$15 for exam and glasses Up to \$39
ESSENTIAL MEDICAL EYE CARE	- 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	\$20 per exam

PRESCRIPTION GLASSES		
FRAME*	\$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 12 months	Combined with exam
LENSES	- Single vision, lined bifocal, and lined trifocal lenses - Every 12 months	Combined with exam
LENS ENHANCEMENTS	- Standard progressive lenses - Premium progressive lenses - Custom progressive lenses - Anti-glare coating - Tints/Light-reactive lenses - Impact-resistant lenses - UV protection - Average savings of 30% on other lens enhancements - Every 12 months	\$0 \$25 \$25 \$25 \$0 \$0 \$0
CONTACTS (INSTEAD OF GLASSES)	\$200 allowance for contacts and contact lens exam (fitting and evaluation) 15% savings on a contact lens exam (fitting and evaluation) - Every 12 months	\$0

ADDITIONAL SAVINGS	Glasses and Sunglasses - 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. - Get 20% off eyewear on eyeconic.com just for being a VSP member.
	Laser Vision Correction Average of 15% off the regular price; discounts available at contracted facilities.
	Exclusive Member Extras for VSP Members - Contact lens rebates, lens satisfaction guarantees, and more offers at vsp.com/offers. - Save up to 60% on digital hearing aids with TruHearing®. Visit vsp.com/offers/special-offers/hearing-aids for details. - Enjoy everyday savings on health, wellness, and more with VSP Simple Values.

COVERAGE WITH AN OUT-OF-NETWORK DOCTOR

Your plan provides the following out-of-network reimbursements:

Examup to \$45 Lined Bifocal Lensesup to \$50 Progressive Lensesup to \$50
 Frameup to \$70 Lined Trifocal Lensesup to \$65 Contactsup to \$105
 Single Vision Lensesup to \$30

Maximize your benefits at an in-network location. Log in to [vsp.com](https://www.vsp.com) to choose an in-network doctor near you, including our large network of private practice and retail locations.