



# 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.

**COBRA Member  
(Employee)**


## 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 VSP Premier Edge™ location, including thousands of private practice doctors and Visionworks® locations nationwide.

## Shop online and connect your benefits.

 Prefer to shop online? Eyeconic® is the in-network online store for VSP members where you can shop glasses, contacts, 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.

## Enjoy enhanced coverage in 2025.

Effective 01/01/2025, you can save more on eye care and eyewear. Visit a VSP Premier Edge location to save up to an additional \$49 on your eye exam and retinal screening. Plus, Premier Plan members can enjoy a higher frame allowance of \$250 every calendar year (that's \$50 more to spend on frames than in 2024!). See the back page for details!

## More Ways to Save

Extra

**\$20**

to spend on

**Featured Frame Brands†**



See all brands and offers at [vsp.com/offers](https://vsp.com/offers).



Up to

**40%**

Savings on

**lens enhancements‡**

## Questions?

Contact us: 800.400.4569 or [stateofcaemployee.vspforme.com](https://stateofcaemployee.vspforme.com)

+Coverage with a retail chain may be different or not apply.

†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.

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.

To learn about your privacy rights and how your protected health information may be used, see the VSP Notice of Privacy Practices on [vsp.com](https://vsp.com).

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VSP, Eyeconic, and WellVision Exam are registered trademarks, and VSP Premier Edge is a trademark of Vision Service Plan. Flexon and Dragon are registered trademarks of Marchon Eyewear, Inc. All other brands or marks are the property of their respective owners. 128061 VCCM

# COBRA Coverage Under the State of California

As a COBRA member, you are eligible to enroll in the plan option you were enrolled in at the time of your qualifying COBRA event. If you'd like to make changes to your plan selection or add or remove dependents, you can do so during open enrollment.

## Provider Network:

Basic Plan: Advantage

Premier Plan: Choice

## Effective Date:

01/01/2025



## BOLD = SAVINGS YOU'LL LOVE IN 2025!

BENEFIT	DESCRIPTION	COPAY	BENEFIT	DESCRIPTION	COPAY
<b>BASIC PLAN Coverage with a VSP Provider</b>			<b>PREMIER PLAN Coverage with a VSP Provider</b>		
<b>WELLVISION EXAM</b>	<ul style="list-style-type: none"> <li>Focuses on your eyes and overall wellness</li> <li>Routine retinal imaging</li> <li>One every calendar year</li> </ul>	<p>\$10 or <b>\$0 at Premier Edge locations</b></p> <p>Up to \$39 or <b>\$0 at Premier Edge locations</b></p>	<b>WELLVISION EXAM</b>	<ul style="list-style-type: none"> <li>Focuses on your eyes and overall wellness</li> <li>Routine retinal imaging</li> <li>One every calendar year</li> </ul>	<p>\$10 or <b>\$0 at Premier Edge locations</b></p> <p>Up to \$39 or <b>\$0 at Premier Edge locations</b></p>
<b>ESSENTIAL MEDICAL EYE CARE</b>	<ul style="list-style-type: none"> <li>Retinal imaging for members with diabetes covered-in-full</li> <li>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.</li> <li>Coordination with your medical coverage may apply. Ask your VSP network doctor for details.</li> <li>Available as needed</li> </ul>	\$5 per exam	<b>ESSENTIAL MEDICAL EYE CARE</b>	<ul style="list-style-type: none"> <li>Retinal imaging for members with diabetes covered-in-full</li> <li>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.</li> <li>Coordination with your medical coverage may apply. Ask your VSP network doctor for details.</li> <li>Available as needed</li> </ul>	\$5 per exam
<b>PRESCRIPTION GLASSES</b>			<b>PRESCRIPTION GLASSES</b>		
<b>FRAME<sup>+</sup></b>	<ul style="list-style-type: none"> <li>\$150 frame allowance</li> <li>\$170 Featured Frame Brands allowance</li> <li>20% savings on the amount over your allowance</li> <li>One frame every calendar year</li> </ul>	\$25	<b>FRAME<sup>+</sup></b>	<ul style="list-style-type: none"> <li><b>\$250 frame allowance</b></li> <li><b>\$270 Featured Frame Brands allowance</b></li> <li>20% savings on the amount over your allowance</li> <li><b>\$135 Walmart/Sam's Club/Costco frame allowance</b></li> <li>One frame every calendar year</li> </ul>	\$10
<b>LENSES</b>	<ul style="list-style-type: none"> <li>Single vision, lined bifocal, and lined trifocal lenses</li> <li>Impact-resistant lenses for dependent children</li> <li>One set of lenses every calendar year</li> </ul>		<b>LENSES</b>	<ul style="list-style-type: none"> <li>Single vision, lined bifocal, and lined trifocal lenses</li> <li>Impact-resistant lenses for dependent children</li> <li>One set of lenses every calendar year</li> </ul>	
<b>LENS ENHANCEMENTS<sup>+</sup></b>	<ul style="list-style-type: none"> <li>Light-reactive lenses</li> <li>Impact-resistant lenses for adults</li> <li>Standard progressive lenses</li> <li>Premium progressive lenses</li> <li>Custom progressive lenses</li> <li>Average savings of 20-25% on other lens enhancements</li> <li>Every calendar year</li> </ul>	<p>\$0</p> <p>\$35</p> <p>\$55</p> <p>\$95 - \$105</p> <p>\$150 - \$175</p>	<b>LENS ENHANCEMENTS<sup>+</sup></b>	<ul style="list-style-type: none"> <li>Light-reactive lenses</li> <li>Impact-resistant lenses for adults</li> <li>Standard progressive lenses</li> <li>Premium progressive lenses</li> <li>Custom progressive lenses</li> <li>Average savings of 30% on other lens enhancements</li> <li>Every calendar year</li> </ul>	<p>\$0</p> <p>\$15</p> <p>\$0</p> <p>\$40 - \$50</p> <p>\$95 - \$120</p>
<b>CONTACTS (INSTEAD OF GLASSES)</b>	<ul style="list-style-type: none"> <li>\$110 allowance for contacts and contact lens exam (fitting and evaluation)</li> <li>15% savings on a contact lens exam (fitting and evaluation)</li> <li>Every calendar year</li> </ul>	\$0	<b>CONTACTS (INSTEAD OF GLASSES)</b>	<ul style="list-style-type: none"> <li>\$200 allowance for contacts and contact lens exam (fitting and evaluation)</li> <li>15% savings on a contact lens exam (fitting and evaluation)</li> <li>Every calendar year</li> </ul>	\$0
<b>ADDITIONAL SAVINGS</b>	<b>Glasses and Sunglasses</b> <ul style="list-style-type: none"> <li>Discover all current eyewear offers and savings at <a href="https://vsp.com/offers">vsp.com/offers</a>.</li> <li>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.</li> </ul>				
	<b>Laser Vision Correction</b> <ul style="list-style-type: none"> <li>Average of 15% off the regular price; discounts available at contracted facilities.</li> </ul>				
	<b>Exclusive Member Extras</b> <ul style="list-style-type: none"> <li>Save up to 60% on digital hearing aids with TruHearing. Visit <a href="https://vsp.com/offers/special-offers/hearing-aids">vsp.com/offers/special-offers/hearing-aids</a> for details.</li> <li>Contact lens rebates, lens satisfaction guarantees, and more offers at <a href="https://vsp.com/offers">vsp.com/offers</a>.</li> <li>Everyday savings on entertainment, health and wellness, travel, and more with VSP Simple Values.</li> </ul>				
<b>YOUR MONTHLY PREMIUM</b>	<b>Basic Plan:</b> \$8.26 Member only      \$8.26 Member + family \$8.26 Member + one		<b>YOUR MONTHLY PREMIUM</b>	<b>Premier Plan:</b> \$17.06 Member only      \$36.22 Member + family \$25.69 Member + one	

## 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 private practice, retail<sup>+</sup>, and online in-network choices. Log in to [vsp.com](https://vsp.com) to find an in-network provider.