



A Look at Your VSP Vision Coverage

With VSP® Vision Care and the California State University, your eye health matters.



Get an Extra **\$20** to spend on Featured Frame Brands.



Just look for the **VSP heart logo** on the lens to maximize your benefits.†

bebe Calvin Klein COLE HAAN

DRAGON FLEXON LONGCHAMP

and more at vsp.com/framebrands

Up to **40%** savings on lens enhancements‡

Learn more at vsp.com/offers

Enroll in VSP® Vision Care to get access to savings and personalized vision care from a VSP network doctor for you and your family.

Routine eye exams have saved lives.

Did you know an eye exam is the only non-invasive way to view blood vessels in your body? Your eye doctor can detect signs of more than 270 health conditions during your annual eye exam—including diabetes and high blood pressure, as well as eye conditions such as glaucoma and diabetic eye disease.**

The choice is yours!



With thousands of choices, getting the most out of your benefits is easy at a VSP Premier Edge™ location.

Shop online and connect your benefits.



Simply connect your benefits when you log in to **eyeconic.com** and have a valid prescription ready when you check out.

Your monthly premium.

Basic Plan:

- \$0 Employee only
- \$0 Employee + one
- \$0 Employee + family

Premier Plan:

- \$5.06 Employee only
- \$17.08 Employee + one
- \$31.73 Employee + family

Getting started is easy!

Make the most of your plan by creating an account on **vsp.com**. Log in to view your in-network coverage, find a VSP network doctor, download your Member ID card (and save it to your digital wallet), and discover extra savings.

Enjoy enhanced coverage with the VSP Premier Plan.

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

**Full Picture of Eye Health, American Optometric Association, 2020. †Frame brands and promotion are subject to change. Only available to VSP members with applicable plan benefits. Only available at in-network locations. Members who participate in a Medicaid/state-funded plan are not eligible. ‡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. Availability of VSP Premier Edge may vary.

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.

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Classification: Restricted

Employee Coverage for California State University

Affordable vision coverage for glasses, contacts, and more through CSU. Stick with the Basic Plan or upgrade to the Premier Plan for enhanced benefits.

Provider Network:

Basic Plan: VSP Advantage

Premier Plan: VSP Choice

Effective Date:

01/01/2027



BENEFIT	DESCRIPTION	COPAY	BENEFIT	DESCRIPTION	COPAY
BASIC PLAN Coverage with a VSP Doctor			PREMIER PLAN Coverage with a VSP Doctor		
WELLVISION EXAM*	- Focuses on your eyes and overall wellness - Routine retinal screening - Every calendar year	\$10 Up to \$39	WELLVISION EXAM*	- Focuses on your eyes and overall wellness - Routine retinal screening - Every calendar year	\$10 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	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			PRESCRIPTION GLASSES		
FRAME*	\$130 Featured Frame Brands allowance \$110 frame allowance 20% savings on the amount over your allowance - Every other calendar year	\$0	FRAME*	\$230 Featured Frame Brands allowance \$210 frame allowance 20% savings on the amount over your allowance \$115 Walmart/Sam's Club/Costco frame allowance - Every calendar year	\$0
LENSES	- Single vision, lined bifocal, and lined trifocal lenses - Impact-resistant lenses for dependent children - Every other calendar year¹		LENSES	- Single vision, lined bifocal, and lined trifocal lenses - Impact-resistant lenses for dependent children - Every calendar year	
LENS ENHANCEMENTS*	- UV protection - Standard progressive lenses - Premium progressive lenses - Custom progressive lenses - Average savings of 20-25% on other lens enhancements - Every other calendar year	\$0 \$55 \$95 - \$105 \$150 - \$175	LENS ENHANCEMENTS*	- UV protection - Tinted lenses - Standard progressive lenses - Premium progressive lenses - Custom progressive lenses - Average savings of 30% on other lens enhancements - Every calendar year	\$0 \$0 \$0 \$95 - \$105 \$150 - \$175
CONTACTS (INSTEAD OF GLASSES)	\$120 allowance for contacts and contact lens exam (fitting and evaluation) 15% savings on a contact lens exam (fitting and evaluation) - Every other calendar year¹	\$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 calendar year	\$0
VSP LIGHTCARE™*	\$110 allowance for ready-made non-prescription sunglasses, or ready-made non-prescription blue light filtering glasses, instead of prescription glasses or contacts - Every other calendar year	\$0	VSP LIGHTCARE™*	\$210 allowance for ready-made non-prescription sunglasses, or ready-made non-prescription blue light filtering glasses, instead of prescription glasses or contacts - Every calendar year	\$0
VSP COMPUTER VISIONCARE™ PLAN (EMPLOYEE-ONLY COVERAGE)	- Evaluates your vision needs related to computer use \$95 allowance for a wide selection of frames - Single vision, lined bifocal, lined trifocal and occupational lenses - Every other calendar year¹				\$10
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 - 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. - Everyday savings on health, wellness, and more with VSP Simple Values.				

1. New lenses will be approved every calendar year if the new prescription differs from the original by at least .50 diopter sphere or cylinder, there's a change in the axis of 15 degrees or more, or a difference in vertical prism greater than one prism.