

A Look at Your VSP Vision Coverage

With VSP and COUNTY OF SAN MATEO,
your health comes first.



Enroll in VSP® Vision Care to 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, which is part of our incredible network of doctors.

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.

Using your benefit is easy!

Create an account on [vsp.com](https://www.vsp.com) to view your in-network coverage, find the VSP network doctor who's right for you, and discover savings with exclusive member extras. At your appointment, just tell them you have VSP.

vsp
vision care

More Ways
to Save

Extra
\$20

to spend on
Featured Brands†

bebe CALVIN KLEIN
COLE HAAN DRAGON.
FLEXON LACOSTE
and more

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

+

Up to
40%
Savings on
lens enhancements‡

Enroll through your employer today.
Contact us: **800.877.7195** or [vsp.com](https://www.vsp.com)

YOUR VSP VISION BENEFITS SUMMARY

COUNTY OF SAN MATEO and VSP provide you with a choice of affordable vision plans. Choose the eye care essentials or upgrade to give your eyes extra love.

PROVIDER NETWORK:
VSP Signature

EFFECTIVE DATE:
01/01/2025



BENEFIT	DESCRIPTION	COPAY	BENEFIT	DESCRIPTION	COPAY
BASE Coverage with a VSP Provider			BUY-UP Coverage with a VSP Provider		
WELLVISION EXAM	<ul style="list-style-type: none"> Focuses on your eye health and overall wellness Every calendar year 	\$10	WELLVISION EXAM	<ul style="list-style-type: none"> Focuses on your eye health and overall wellness KidsCare: Children have two fully covered WellVision exams up to the age of 18 Every calendar year 	\$10
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 	\$0 per screening \$20 per exam	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 	\$0 per screening \$20 per exam
PRESCRIPTION GLASSES			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 other calendar year 	Included in Prescription Glasses	FRAME⁺	<ul style="list-style-type: none"> \$220 Featured Frame Brands allowance \$200 frame allowance 20% savings on the amount over your allowance \$110 Walmart®/Sam's Club®/Costco® frame allowance KidsCare: Frames covered every calendar year for children up to age 18 Every calendar year 	Included in Prescription Glasses
LENSES	<ul style="list-style-type: none"> Single vision, lined bifocal, lined trifocal lenses Impact-resistant lenses for dependent children Every calendar year 	Included in Prescription Glasses	LENSES	<ul style="list-style-type: none"> Single vision, lined bifocal, lined trifocal lenses Impact-resistant lenses for dependent children KidsCare: Additional lenses for children are fully covered when needed Every calendar year 	Included in Prescription Glasses
LENS ENHANCEMENTS	<ul style="list-style-type: none"> Standard progressive lenses Premium progressive lenses Custom progressive lenses Average 40% savings on other lens enhancements Every calendar year 	\$0 \$80 – \$90 \$120 – \$160	LENS ENHANCEMENTS	<ul style="list-style-type: none"> Standard progressive lenses UV protection Anti-glare coating Premium progressive lenses Custom progressive lenses Average 40% savings on other lens enhancements Every calendar year 	\$0 \$0 \$35 \$80 – \$90 \$120 – \$160
CONTACTS (INSTEAD OF GLASSES)	<ul style="list-style-type: none"> \$150 allowance for contacts; copay does not apply Contacts lens exam (fitting and evaluation) Every calendar year 	Up to \$60	CONTACTS (INSTEAD OF GLASSES)	<ul style="list-style-type: none"> \$200 allowance for contacts; copay does not apply Contacts lens exam (fitting and evaluation) Every calendar year 	Up to \$60
			LIGHTCARE™	<ul style="list-style-type: none"> \$200 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 	\$10

ADDITIONAL SAVINGS	Glasses and Sunglasses
	Routine Retinal Screening
	Laser Vision Correction
	Exclusive Member Extras

*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 participating retail chain may be different or not apply. EasyOptions Plan Benefits are not available at Walmart, Sam's Club, or Costco.

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.