

RETIRED EMPLOYEE VISION BENEFITS

VSP. Vision care for life

Effective: January 1, 2024 – December 31, 2025 Rate Guaranteed thru 12/31/2025

VSP Choice	Option 2 High Core / High Voluntary	
Copays	\$10 Exam / \$10 Materials (Lenses and/or frames)	
Exam Every:	12 Months	
Lenses Every:	12 Months	
Frame Every:	24 Months	
Diabetic EyeCare Plus	\$20 copay	
	ecare services targeted specifically for members with dial	
	laucoma, or age-related macular degeneration (AMD)	-
Examination	Covered in full after copay	
Contact Lens Exam (Fitting & Evaluation)	Contact lens exam (fitting and evaluation) is covered in full with a copay not to exceed \$60 for all contact lens wearers. Members will also receive 15% off of the contact lens exam	
Lenses:	Covered in full after copay	
Single Vision		
Lined Bifocal Lined Trifocal	Covered in full after copay Covered in full after copay	
Lenticular	Covered in full after copay	
Lens Enhancements:	The most popular lens enhancements are covered-in-full with a copay,	
	saving our members an average of 20-25%	
	Single Vision Multifocal	
Standard Anti-reflective coating	\$41	\$41
Polycarbonate for children	Covered in full	Covered in full
Polycarbonate	\$31	\$35
Progressives	N/A	\$55-175
Photochromic/tints	\$70	\$82
Standard Scratch-resistant coating	\$17	\$17
Frames	\$190.00 Members who select a featured frame brand including Anne Klein, bebe®, Calvin Klein, Flexon®, Lacoste, Nike, Nine West and more will receive an extra \$20 toward their frame allowance* *Reflects current promotion, evaluated annually. Promotion/featured frame brands are subject to change and the promotional allowance does not apply at Costco Optical. In the event of a conflict between this information and your organization's contract with VSP, the terms of the contract will prevail.	
Elective Contact Lenses*	\$120.00	
Necessary Contact Lenses*	Covered in full after materials copay	
	*Contact Lenses are in lieu of spectacle le	nses and frames once every 12 months
EXTRA SAVINGS	A	
	Average 20-25% savings on all non-covered lens enhancements 20% off retail frame allowance overage	
	20% off additional glasses and sunglasses, including lens enhancements, from the same VSP doctor on the same day as your WellVision Exam.	
	Laser Vision Correction - Average 15% off the regular price or 5% off the promotional price. Discounts only available from contracted facilities.	
OPEN ACCESS SCHEDULE (Out of Network)		
Examination	\$35 Allo	wance
Lenses:	\$\$\$7416	
Single Vision	\$25 Allowance	
Bifocal	\$35 Allowance	
Trifocal	\$45 Allowance	
Lenticular	\$100 Allowance	
Progressive	\$35 Allowance	
Frames	\$55 Allowance \$95 Allowance	
Elective Contact Lenses	\$95 Allowance \$250 Allowance	
Necessary Contact Lenses FULLY INSURED RATES	\$250 Alic	
	Monthly	
Retiree Only	•	
Retiree + Spouse		
Retiree + Child(ren)	\$11.49	
Retiree + Family	\$15.91	