

Make Eye Health a Priority with VSP!

Your health comes first with VSP and County of Alameda. Take a look at your VSP vision care coverage.



VSP members save an annual average of

\$489*

More Ways to Save

Extra **\$20** to spend on
Featured Frame Brands†

bebe Calvin Klein COLE HAAN
 DRAGON FLEXON LONGCHAMP
 and more

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

See all brands and offers
at vsp.com/offers.

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 VSP® network eye doctor can detect signs of over 270 health conditions during an eye exam.**

Savings you'll love.

See and look your best without breaking the bank. VSP members get exclusive savings on popular frame brands and contact lenses, and they get additional discounts on things like LASIK, and more.

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.



Save up to \$250 on Featured Frame Brands when you shop on Eyeconic®, the VSP preferred online eyewear store.

Enroll through your employer today.

Questions?

vsp.com or

800.877.7195 (TTY: 711)



Scan QR code
or visit vsp.com
to learn more.

Getting started is easy!

Let your plan do the most it can. When you create an account on vsp.com, you can view your in-network coverage details, find a VSP network doctor that is right for you, and discover extra savings to maximize your benefits.

†Frame brands and promotion 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. *Based on state and national averages for eye exams and most commonly purchased brands. This represents the average savings for a VSP member with a full-service plan at an in-network provider. Your actual savings will depend on the eyewear you choose, the plan available to you, the eye doctor you visit, your copays, your premium, and whether it is deducted from your paycheck pre-tax. Source: VSP book-of-business paid claims data for Aug-Jan of each prior year. **Full Picture of Eye Health, American Optometric Association, 2020. +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. VSP Premier Edge™ is not available for some members in the state of Texas.

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.
 Visionworks, Eyeconic, and Eyemart Express family of stores are VSP-affiliated companies.

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 All other brands or marks are the property of their respective owners. 125909 VCCM

Your VSP Vision Benefits Summary

Prioritize your health and your budget with a VSP plan through County of Alameda. Get coverage for essentials, or upgrade to enhance your coverage options.

Provider Network:
VSP Choice
Effective Date:
02/01/2026



BENEFIT	DESCRIPTION	COPAY
PLUS PLAN Coverage with a VSP Doctor		
WELLVISION EXAM®	- Focuses on your eyes and overall wellness - Routine retinal screening - Every plan year¹	\$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⁺	\$170 Featured Frame Brands allowance \$150 frame allowance 20% savings on the amount over your allowance \$150 Walmart/Sam's Club frame allowance \$80 Costco frame allowance - Every other plan year	Combined with exam
LENSES	- Single vision, lined bifocal, and lined trifocal lenses - Impact-resistant lenses for dependent children - Every plan year	Combined with exam
LENS ENHANCEMENTS⁺	- Standard progressive lenses - Premium progressive lenses - Custom progressive lenses - Average savings of 30% on other lens enhancements - Every plan year	\$0 \$95 - \$105 \$150 - \$175

CONTACTS (INSTEAD OF GLASSES)	\$130 allowance for contacts; copay does not apply - Contact lens exam (fitting and evaluation) - Every plan year	Up to \$60
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VSP COMPUTER VISIONCARE™ PLAN		
COMPUTER VISION EXAM	- Evaluates your needs related to computer use - Every plan year	\$15 for exam and glasses
FRAME⁺	\$110 Featured Frame Brands allowance \$90 frame allowance 20% savings on the amount over your allowance - Every other plan year	Combined with exam
LENSES	- Single vision, lined bifocal, lined trifocal, and occupational lenses - Every plan year	Combined with exam
VSP LIGHTCARE™⁺	\$150 allowance for ready-made non-prescription sunglasses, or ready-made non-prescription blue light filtering glasses, instead of prescription glasses or contacts - Every other plan year	Combined with exam

COVERAGE WITH AN OUT-OF-NETWORK DOCTOR		
With so many in-network choices, VSP makes it easy to maximize your benefits. Choose from our large doctor network including private practice and retail locations. Plus, you can shop eyewear online at Eyeconic®. Log in to vsp.com to find an in-network doctor. Your plan provides the following out-of-network reimbursements:		
Exam	up to \$50	Lined Bifocal Lenses up to \$60
Frame	up to \$70	Lined Trifocal Lenses up to \$80
Single Vision Lenses	up to \$40	Progressive Lenses up to \$60
		Contacts up to \$130

PLEASE NOTE: Your eligibility for benefits will follow the frequency of your newly elected plan. For example, if you had the Premium plan and received frames in 2024, and elected the Plus Plan for 2025, you are not eligible for frames until 2026. Log in to vsp.com to review your benefits.

BENEFIT	DESCRIPTION	COPAY
PREMIUM PLAN Coverage with a VSP Doctor		
WELLVISION EXAM®	- Focuses on your eyes and overall wellness - Routine retinal screening - Every plan year¹	\$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 \$250 Walmart/Sam's Club frame allowance \$135 Costco frame allowance - Every plan year	Combined with exam
LENSES	- Single vision, lined bifocal, and lined trifocal lenses - Every plan year	Combined with exam
LENS ENHANCEMENTS⁺	- Standard progressive lenses - Premium/Custom progressive lenses - Anti-glare coating - Impact-resistant lenses - Tints/Light-reactive lenses - Average savings of 30% on other lens enhancements - Every plan year	\$0 \$25 \$25 \$0 \$0

CONTACTS (INSTEAD OF GLASSES)	\$200 allowance for contacts; copay does not apply - Contact lens exam (fitting and evaluation) - Every plan year	Up to \$60
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VSP COMPUTER VISIONCARE™ PLAN		
COMPUTER VISION EXAM	- Evaluates your needs related to computer use - Every plan year	\$15 for exam and glasses
FRAME⁺	\$110 Featured Frame Brands allowance \$90 frame allowance 20% savings on the amount over your allowance - Every plan year	Combined with exam
LENSES	- Single vision, lined bifocal, lined trifocal, and occupational lenses - Every plan year	Combined with exam
VSP LIGHTCARE™⁺	\$250 allowance for ready-made non-prescription sunglasses, or ready-made non-prescription blue light filtering glasses, instead of prescription glasses or contacts - Every plan year	Combined with exam

COVERAGE WITH AN OUT-OF-NETWORK DOCTOR		
With so many in-network choices, VSP makes it easy to maximize your benefits. Choose from our large doctor network including private practice and retail locations. Plus, you can shop eyewear online at Eyeconic®. Log in to vsp.com to find an in-network doctor. Your plan provides the following out-of-network reimbursements:		
Exam	up to \$50	
Glasses	up to \$200	
Contacts	up to \$200	