

Vision Care Plans

Plan Features	Basic Choice	Standard Choice	Premier Choice																																				
Rates																																							
Employee Only	\$ 4.67	\$ 5.65	\$ 6.98																																				
Employee + Spouse	\$ 9.81	\$11.87	\$14.66																																				
Employee + Child(ren)	\$ 8.87	\$10.74	\$13.26																																				
Family	\$14.01	\$16.95	\$20.94																																				
Frequencies (Exam/Lenses/Frame)	12/24/24	12/12/24	12/12/12																																				
Copayments	\$10 Exam / \$25 Materials	\$10 Exam / \$25 Materials	\$10 Exam / \$25 Materials																																				
Exam	Covered in full (less copay)	Covered in full (less copay)	Covered in full (less copay)																																				
Lenses	<ul style="list-style-type: none"> Glass or plastic, single vision, lined bifocal, lined trifocal, or lenticular prescription lenses are covered in full¹ 	<ul style="list-style-type: none"> Glass or plastic, single vision, lined bifocal, lined trifocal, or lenticular prescription lenses are covered in full¹ 	<ul style="list-style-type: none"> Glass or plastic, single vision, lined bifocal, lined trifocal, or lenticular prescription lenses are covered in full¹ 																																				
Lens Options	<ul style="list-style-type: none"> Guaranteed pricing on the most popular lens options, saving our members an average of 20-25%¹ Dependent children are eligible for covered in full polycarbonate prescription lenses 	<ul style="list-style-type: none"> Guaranteed pricing on the most popular lens options, saving our members an average of 20-25%² Dependent children are eligible for covered in full polycarbonate prescription lenses 	<ul style="list-style-type: none"> Guaranteed pricing on the most popular lens options, saving our members an average of 20-25%³ Dependent children are eligible for covered in full polycarbonate prescription lenses 																																				
Frame	<ul style="list-style-type: none"> \$130 frame allowance 20% discount on overage 	<ul style="list-style-type: none"> \$130 frame allowance 20% discount on overage 	<ul style="list-style-type: none"> \$130 frame allowance 20% discount on overage 																																				
Contact Lenses	<ul style="list-style-type: none"> \$130 allowance 15% discount applied to contact lens exam, then \$130 allowance is applied to both contact lens exam and materials 	<ul style="list-style-type: none"> \$130 allowance 15% discount applied to contact lens exam, then \$130 allowance is applied to both contact lens exam and materials 	<ul style="list-style-type: none"> \$130 allowance 15% discount applied to contact lens exam, then \$130 allowance is applied to both contact lens exam and materials 																																				
Discounts	<ul style="list-style-type: none"> 15-20% off (average) laser vision correction 20% off unlimited additional pairs of prescription glasses and/or non-prescription sunglasses 	<ul style="list-style-type: none"> 15-20% off (average) laser vision correction 20% off unlimited additional pairs of prescription glasses and/or non-prescription sunglasses 	<ul style="list-style-type: none"> 15-20% off (average) laser vision correction 20% off unlimited additional pairs of prescription glasses and/or non-prescription sunglasses 																																				
Out-of-Network	<table border="0"> <tr><td>Exam</td><td>\$45</td></tr> <tr><td>Single Vision</td><td>\$30</td></tr> <tr><td>Bifocals</td><td>\$50</td></tr> <tr><td>Trifocals</td><td>\$65</td></tr> <tr><td>Frame</td><td>\$70</td></tr> <tr><td>Elective Contacts</td><td>\$105</td></tr> </table>	Exam	\$45	Single Vision	\$30	Bifocals	\$50	Trifocals	\$65	Frame	\$70	Elective Contacts	\$105	<table border="0"> <tr><td>Exam</td><td>\$45</td></tr> <tr><td>Single Vision</td><td>\$30</td></tr> <tr><td>Bifocals</td><td>\$50</td></tr> <tr><td>Trifocals</td><td>\$65</td></tr> <tr><td>Frame</td><td>\$70</td></tr> <tr><td>Elective Contacts</td><td>\$105</td></tr> </table>	Exam	\$45	Single Vision	\$30	Bifocals	\$50	Trifocals	\$65	Frame	\$70	Elective Contacts	\$105	<table border="0"> <tr><td>Exam</td><td>\$45</td></tr> <tr><td>Single Vision</td><td>\$30</td></tr> <tr><td>Bifocals</td><td>\$50</td></tr> <tr><td>Trifocals</td><td>\$65</td></tr> <tr><td>Frame</td><td>\$70</td></tr> <tr><td>Elective Contacts</td><td>\$105</td></tr> </table>	Exam	\$45	Single Vision	\$30	Bifocals	\$50	Trifocals	\$65	Frame	\$70	Elective Contacts	\$105
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Laser Vision Correction Discounts

VSP has arranged for members to receive PRK, LASIK and Custom LASIK at a discounted fee, which could add up to hundreds of dollars in savings. Discounts vary by location, but will average 15 percent off of the contracted laser center's usual and customary price. Additionally, if the laser center is offering a temporary price reduction, VSP members will receive 5 percent off of the promotional price.

¹Less any applicable copay

²Most popular lens options include progressives, anti-reflective, photochromics, scratch resistant coating, polycarbonate, plastic dyes, and UV protection. All other lens options available at 20% discount.

³Prices shown reflect the standard option price, prices on premium options may vary. Prices are valid only through VSP Preferred Providers and are subject to change without notice.