

Make Eye Health a Priority with VSP!

Your health comes first with VSP and Orinda USD. Take a look at your VSP vision care coverage.



VSP members save an annual average of

More Ways to Save

Extra \$20 to spend on Featured Frame Brands[†]

bebe ODRAGON. Calvin Klein **FLEXON**

COLE HAAN LONGCHAMP



Up to 40% Savings on lens enhancements‡

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

Create an account today. Questions? vsp.com 800.877.7195 (TTY: 711)



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

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 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 eve disease.**

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 private practice doctors, Visionworks®, and Eyemart Express retail locations to choose from nationwide, getting the most out of your benefits is easy at a VSP Premier Edge™ location.



Get more at preferred in-network doctor locations

private practice doctors

Visionworks

Using your benefit is easy!

Create an account on **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.

†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 quarantees 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

Your VSP Vision Benefits Summary

Prioritize your health and your budget with a VSP plan through Orinda USD.

Provider Network: VSP Signature **Effective Date:** 01/01/2026



BENEFIT	DESCRIPTION	COPAY	FREQUENCY	
	YOUR COVERAGE WITH A VSP DOCTOR			
WELLVISION EXAM	Focuses on your eyes and overall wellness Routine retinal screening	\$20 for exam and glasses Up to \$39	Every 12 months	
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	
PRESCRIPTION GLASSES				
FRAME*	 \$220 Featured Frame Brands allowance \$200 frame allowance 20% savings on the amount over your allowance \$110 Costco frame allowance 	Combined with exam	Every 24 months	
LENSES	Single vision, lined bifocal, and lined trifocal lensesImpact-resistant lenses for dependent children	Combined with exam	Every 24 months	
LENS ENHANCEMENTS	 Standard progressive lenses Premium progressive lenses Custom progressive lenses Average savings of 40% on other lens enhancements 	\$0 \$80 - \$90 \$120 - \$160	Every 24 months	
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) 	\$0	Every 24 months	
VSP LIGHTCARE™	\$200 allowance for ready-made non-prescription sunglasses, or ready-made non-prescription blue light filtering glasses, instead of prescription glasses or contacts.	Combined with exam	Every 24 months	
	 Glasses and Sunglasses Discover all current eyewear offers and savings at vsp.com/offers 30% savings on unlimited additional pairs of prescription or non-penhancements, from the same VSP provider on the same day as y from a VSP provider within 12 months of your last WellVision Examples 	rescription glasses/ your WellVision Exa		
ADDITIONAL SAVINGS	Laser Vision CorrectionAverage of 15% off the regular price; discounts available at contra	acted facilities.		
	Exclusive Member Extras for VSP Members Contact lens rebates, lens satisfaction guarantees, and more offer Save up to 60% on digital hearing aids with TruHearing®. Visit vsp details. Enjoy everyday savings on health, wellness, and more with VSP S	o.com/offers/specia		
COVERAGE WITH AN OL	JT-OF-NETWORK DOCTOR			
With so many in-network c	choices, VSP makes it easy to maximize your benefits. Choose from our lar bu can shop eyewear online at Eyeconic®. Log in to vsp.com to find an in-n			

out-of-network reimbursements:

Examup to \$45	Lined Bifocal Lensesup to \$65	Progressive Lensesup to \$85
Frameup to \$47	Lined Trifocal Lensesup to \$85	Contactsup to \$105
Single Vision Lensesup to \$45		