



## Trust your eyes to VSP® Vision Care!

Dear CSU Employee,

Great news, the California State University (CSU) and Vision Service Plan (VSP) have partnered to offer you a choice of **two vision plans!** You now have the option to purchase enhanced VSP benefits effective January 1, 2018! Both the **Basic Plan** and the **Premier Plan** provide quality vision care coverage for you and your eligible dependents. As a current member of the Basic Plan, you don't have to do anything to keep your Basic Plan coverage.

### Enjoy Richer Benefits with the VSP Premier Plan.

- **Annual benefit frequency** for new frames or contacts.
- **\$200** allowance on a wide selection of frames or contact lenses. Enjoy an extra \$20 to spend when you choose a featured frame brand.
- **\$110** frame allowance at participating **Costco** locations.
- Fully covered standard **progressive lenses**.
- Fully covered **tinted lenses**.
- As an enhancement to a WellVision Exam®, pay no more than \$39 copay for a **retinal screening**.

### Don't miss the chance to upgrade your coverage!

Open enrollment is from September 11 through October 6, 2017. If you upgrade your coverage to the Premier Plan your benefits will be effective January 1, 2018 through December 31, 2018 (12 month enrollment period). If you don't upgrade at this time and unless there is a permitting event, the next opportunity to enroll will be during the next open enrollment, with a date effective of January 1, 2019. **Continued enrollment in your current plan is automatic.**

### How can I enroll for the Basic Plan?

Enrollment in the Basic Plan is automatic and at no cost. No action is necessary.

### Can I enroll myself in Premier and keep my dependents in Basic?

No. If you choose to upgrade to the Premier Plan, any dependents you wish to cover will also be upgraded to the Premier Plan coverage. You can't choose to enroll in both the Basic and Premier coverages at the same time.

### How can I upgrade to the Premier Plan?

You have three convenient options. Choose what works best for you!

1. Visit VSP at **csuactives.vspforme.com** and complete the online enrollment form.
2. Call VSP at 800.400.4569 and speak to a Member Services representative.
3. Complete and mail the enclosed VSP enrollment form.

### How do I pay for the vision benefit?

The CSU continues to pay for your Basic Plan. If you choose the Premier Plan, the additional cost will be deducted directly from your paycheck. Refer to the VSP benefit summary for an overview of both plans and the monthly Premier Plan.

We look forward to providing you the best care, value, and choices.

Sincerely,

VSP Client Administrative Services

Life is  
better  
in focus.™



## Get the best in eye care and eyewear with VSP® Vision Care for CSU Active Employees.



Why enroll in the Premier Plan? When you choose Premier, you'll enjoy enhanced benefits, like a \$200 allowance for frames or contacts, every year. As an employee, you don't have to take action to remain enrolled in the Basic Plan.

### You'll like what you see with VSP.

- **Value and Savings.** You'll enjoy more value and the lowest out-of-pocket costs.
- **High Quality Vision Care.** You'll get the best care from a VSP network doctor, including a WellVision Exam®—the most comprehensive exam designed to detect eye and health conditions.
- **Choice of Providers.** The decision is yours to make—choose a VSP network doctor, participating retail chain, or any out-of-network provider.
- **Great Eyewear.** It's easy to find the perfect frame at a price that fits your budget.

### Using your VSP benefit is easy.

- **Create an account at vsp.com.** Once your plan is effective, review your benefit information.
- **Find an eye doctor who's right for you.** Visit [vsp.com](http://vsp.com) or call 800.877.7195.
- **At your appointment, tell them you have VSP.** There's no ID card necessary. If you'd like a card as a reference, you can print one on [vsp.com](http://vsp.com).

**That's it! We'll handle the rest**—there are no claim forms to complete when you see a VSP network doctor.

### Choice in Eyewear

From classic styles to the latest designer frames, you'll find hundreds of options. Choose from featured frame brands like bebe®, Calvin Klein, Cole Haan, Flexon®, Lacoste, Nike, Nine West, and more! Visit [vsp.com](http://vsp.com) to find a Premier Program location that carries these brands. Prefer to shop online? Check out all of the brands at [eyeconic.com](http://eyeconic.com)®, VSP's online eyewear store.

Save with Premier Plan coverage.	With Basic Coverage	With Premier Coverage
Eye Exam	\$10	\$10
Frame (\$200)	\$105	\$0
Bifocal Lenses		
Standard Progressive Lenses	\$55	\$0
Anti-reflective Coating	\$69	\$69
Member Only Annual Contribution	N/A	\$51.96
<b>Total</b>	<b>\$239</b>	<b>\$130.96</b>

Comparison based on national averages for comprehensive eye exams and most commonly purchased brands.

**NOTE:** Dollar amounts in the savings chart are estimates and don't reflect additional discounts from current VSP offers and promotions.

**Additional Annual Savings with the Premier Plan: \$108.04**

Enroll in Premier 9/11/2017 - 10/6/2017. You'll be glad you did.  
Contact us 800.400.4569. | [csuactives.vspforme.com](http://csuactives.vspforme.com)

**Active Employees**

# Your VSP Vision Benefits Summary

Effective Date: 1/1/2018  
Open Enrollment: 9/11/2017 - 10/6/2017

## VSP Vision Care for CSU Active Employees

### VSP Provider Network: VSP Advantage

Basic Plan		
Benefit	Description	Copay
WellVision Exam	<ul style="list-style-type: none"> <li>Focuses on your eyes and overall wellness</li> <li>Every calendar year</li> </ul>	\$10
<b>Prescription Glasses</b>		\$0
Frame	<ul style="list-style-type: none"> <li>\$95 allowance for a wide selection of frames</li> <li>\$115 allowance for featured frame brands</li> <li>20% savings on the amount over your allowance</li> <li>Every other calendar year</li> </ul>	Included in prescription glasses
Lenses	<ul style="list-style-type: none"> <li>Single vision, lined bifocal, and lined trifocal lenses</li> <li>Polycarbonate lenses for dependent children</li> <li>Every other calendar year*</li> </ul>	Included in prescription glasses
Lens Enhancements	<ul style="list-style-type: none"> <li>Standard progressive lenses</li> <li>Premium progressive lenses</li> <li>Custom progressive lenses</li> <li>Average 20-25% savings on other lens enhancements</li> <li>Every other calendar year</li> </ul>	\$55 \$95 - \$105 \$150 - \$175
Contacts (instead of glasses)	<ul style="list-style-type: none"> <li>\$120 allowance for contacts and contact lens exam (fitting and evaluation)</li> <li>15% savings on a contact lens exam (fitting and evaluation)</li> <li>Every other calendar year</li> </ul>	\$0

### VSP Provider Network: VSP Choice

Premier Plan (Enhanced Coverage)		
Benefit	Description	Copay
WellVision Exam	<ul style="list-style-type: none"> <li>Focuses on your eyes and overall wellness</li> <li>Every calendar year</li> </ul>	\$10
<b>Prescription Glasses</b>		\$0
Frame	<ul style="list-style-type: none"> <li>\$200 allowance for a wide selection of frames</li> <li>\$220 allowance for featured frame brands</li> <li>20% savings on the amount over your allowance</li> <li>\$110 allowance at Costco®</li> <li>Every calendar year</li> </ul>	Included in prescription glasses
Lenses	<ul style="list-style-type: none"> <li>Single vision, lined bifocal, and lined trifocal lenses</li> <li>Polycarbonate lenses for dependent children</li> <li>Every calendar year</li> </ul>	Included in prescription glasses
Lens Enhancements	<ul style="list-style-type: none"> <li>Tinted lenses</li> <li>Standard progressive lenses</li> <li>Premium progressive lenses</li> <li>Custom progressive lenses</li> <li>Average 20-25% savings on other lens enhancements</li> <li>Every calendar year</li> </ul>	\$0 \$0 \$95-105 \$150-\$175
Contacts (instead of glasses)	<ul style="list-style-type: none"> <li>\$200 allowance for contacts and contact lens exam (fitting and evaluation)</li> <li>15% savings on a contact lens exam (fitting and evaluation)</li> <li>Every calendar year</li> </ul>	\$0
Extra Savings	<b>Retinal Screening</b> <ul style="list-style-type: none"> <li>Pay no more than a \$39 copay on routine retinal screening as an enhancement to a WellVision Exam</li> </ul>	

### Computer Vision Care (Employee-only Coverage)

Computer Vision Exam	<ul style="list-style-type: none"> <li>Evaluates your vision needs related to computer use</li> <li>Every other calendar year</li> </ul>	\$10 for exam
Frame	<ul style="list-style-type: none"> <li>\$95 allowance for a wide selection of frames</li> <li>Every other calendar year</li> </ul>	Combined with exam
Lenses	<ul style="list-style-type: none"> <li>Single vision, lined bifocal, lined trifocal, and occupational lenses</li> <li>Every other calendar year</li> </ul>	Combined with exam
Extra Savings	<b>Glasses and Sunglasses</b> <ul style="list-style-type: none"> <li>Extra \$20 to spend on featured frame brands. Go to <a href="http://vsp.com/specialoffers">vsp.com/specialoffers</a> for details.</li> <li>20% savings on additional glasses and sunglasses, including lens enhancements, from any VSP provider within 12 months of your last WellVision Exam.</li> </ul>	
	<b>Laser Vision Correction</b> <ul style="list-style-type: none"> <li>Average 15% off the regular price or 5% off the promotional price; discounts only available at contracted facilities.</li> </ul>	

### Monthly Contribution for the Basic Plan

Member Only	\$0. <sup>00</sup>	Member + 1	\$0. <sup>00</sup>	Member + Family	\$0. <sup>00</sup>
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### Monthly Contribution for the Premier Plan

Member Only	\$4. <sup>33</sup>	Member + 1	\$16. <sup>13</sup>	Member + Family	\$30. <sup>52</sup>
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### Your Coverage with Out-of-Network Providers

Visit [vsp.com](http://vsp.com) for details, if you plan to see a provider other than a VSP network provider.

Exam..... up to \$50	Single Vision Lenses ..... up to \$45	Lined Trifocal Lenses..... up to \$85	Contacts..... Up to \$110
Frame..... up to \$60	Lined Bifocal Lenses..... up to \$65	Progressive Lenses..... up to \$85	

Coverage with a participating retail chain may be different. VSP guarantees coverage 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.

Contact us **800.400.4569**. | [csuactives.vspforme.com](http://csuactives.vspforme.com)

1. Brands/Promotion subject to change.

\*New lenses will be approved every calendar year if the new prescription differs from the original by at least .50 diopter sphere or cylinder, there's a change in the axis of 15 degrees or more, or a difference in vertical prism greater than one prism.

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