

Group: Edge Building Services, Inc. (Plan #4302)

Plan: VSP Plus 10-130

Effective Date: 1/1/2026
Plan Type: Voluntary

	In-Network	Out-of-Network
Network	VSP Choice Plus	
WellVision Exam	\$10 Co-pay	Up to \$65
Lenses (Glass or Plastic)		
Single Vision	\$10 Co-pay	Up to \$30
_ined Bifocal	\$10 Co-pay	Up to \$50
_ined Trifocal	\$10 Co-pay	Up to \$65
_enticular	\$10 Co-pay	Up to \$100
ens Options		
Progressive (Standard no-line)	\$0 Co-pay	Up to \$50 (In lieu of Lined Bifocal reimbursement)
Premium Progressive Options	\$95-\$105 Co-pay	
Custom Progressive Options	\$150-\$175 Co-pay	
Plastic Gradient Dye	\$17 Co-pay	
Solid Plastic Dye	\$15 Co-pay	
Photochromic Lenses	\$75 Co-pay	N/A
Polycarbonate for Adults	\$31 Co-pay SV/\$35 Co-Pay Multifocal	
Polycarbonate for Children (under 18)	\$0 Co-pay	
Coatings		
Scratch Resistant Coating	\$17 Co-pay	
Anti-Reflective Coating	\$41 Co-pay	
JV Protection	\$16 Co-pay	N/A
Additional lens enhancements	Up to 25% Discount	
Frames		
Allowance Based on Retail Pricing	\$130 Allowance at any VSP doctor or \$70 at	Up to \$80
<b>~</b>	Costco, Sam's Club or Walmart	•
Additional Pairs of Glasses**	Up to 20% Off Retail	N/A
Elective Contact Lenses In Lieu of Frame & Lenses		
Elective contact lens fitting, evaluation services		
and prescription contact lenses are covered up	#120 All	1 lo t- \$445
o plan allowance. 15% discount given off	\$130 Allowance	Up to \$115
contact lens fitting and evaluation services,		
excluding materials.		
requency xam, Lenses, Frame or Contacts	Even 40	Months
Exam, Lenses, Frame or Contacts	Every 12	IVIOTIUIS
Refractive Surgery		
ASIK***	Up to \$500 in Savings	Not Covered
Monthly Rates	Volun	tary
Employee	\$8.90	
Employee + Spouse	\$0.90 \$18.70	
Employee + Child(ren)	\$16.70	
	\$20.20	
Employee + Spouse + Child(ren)	\$28	70

Notes Control of the	
This is a summary of plan benefits. The actual Policy will detail all plan limitations and exclusions.	
** 20% discount off unlimited additional pairs of glasses offered through any VSP Choice Providers within 12 months of last covered eye exam.	
*** Discounts average 15-20% off or 5% off a promotional offer for laser surgery, including PRK, LASIK, Custom LASIK, and IntraLase3	