As a CCPOA Supervisor, Your Eyes Have Options. Choose the Vision Plan That Works Best for You!

As a CCPOA Supervisor, you have two great vision plans to choose from! Enroll in the CCPOA Supervisor Plan through the CCPOA Benefit Trust Fund to cover the essentials, or select the State of California Premier Plan, which provides a higher frame or contact lens allowance, additional savings on lens enhancements, and savings on eye care at VSP Premier Edge™ locations.

Look on the next page to learn more about the vision coverage available to you as a CCPOA Supervisor.

Ready to Enroll?

If you choose to enroll in **the CCPOA BTF Supervisor Plan**, complete the Vision Plan Enrollment Authorization (STD 700) and give the completed form to your departmental personnel office for processing.

If you choose to enroll in **the State of California Premier Vision Plan**, you have 60 days from your promotion date or date of hire to enroll. To enroll in this plan, complete a Vision Plan Enrollment Authorization (STD 700) and the Premier Vision Enrollment Form (CalHR 774) and give the completed forms to your departmental personnel office for processing.

Once enrolled in either plan, you can make changes to your benefits during the next open enrollment period.

Follow the steps above to enroll in the plan that works best for you!

Questions? Contact 800.877.7195.

Take a look at the chart below to compare your plan options and choose the one that's right for you. Check your member benefits summary for full details.

	WITH THE VSP® CCPOA BTF SUPERVISORS PLAN	WITH THE VSP STATE OF CALIFORNIA PREMIER VISION PLAN
WellVision Exam®	$10 copay Every 12 months	$10 copay or $0 at Premier Edge locations One every calendar year
Retinal Screening	Up to $39 Every 12 months	Up to $39 or $0 at Premier Edge locations One every calendar year
Prescription Glasses	$25 copay	$10 copay
Frame[1]	$170 Featured Frame Brand allowance[1] $150 frame allowance Every 12 months	$270 Featured Frame Brands allowance[1] $250 frame allowance $135 Walmart/Sam's Club/Costco frame allowance One frame every calendar year
Lenses	Single vision, lined bifocal, lined trifocal lenses, and impact-resistant lenses for dependent children included in prescription glasses. Every 12 months	Single vision, lined bifocal, lined trifocal lenses, and impact-resistant lenses for dependent children included in prescription glasses. One set of lenses every calendar year
Lens Enhancements[1]	Tints/Light-reactive lenses for a $0 copay Standard progressive lenses for $0 copay Premium progressive lenses for a $95 – $105 copay Custom progressive lenses for a $150 – $175 copay Average savings of 30% on other lens enhancements Every 12 months	Tints/Light-reactive lenses for a $0 copay Impact-resistant lenses for adults for a $15 copay Standard progressive lenses for $0 copay Premium progressive lenses for a $40 – $50 copay Custom progressive lenses for a $95 – $120 copay Average savings of 30% on other lens enhancements Every calendar year
Contact Lenses (Instead of Glasses)	$0 copay $110 allowance for contacts and contact lens exam (fitting and evaluation) 15% savings on a contact lens exam (fitting and evaluation) Every 12 months	$0 copay $200 allowance for contacts and contact lens exam (fitting and evaluation) 15% savings on a contact lens exam (fitting and evaluation) Every calendar year
Second Pair of Glasses or Contacts	$120 frame allowance Single vision, lined bifocal, and lined trifocal lenses combined with frame. $35 copay for frames and lenses OR $110 allowance for additional contacts (instead of glasses) Every 12 months	$120 frame allowance Single vision, lined bifocal, and lined trifocal lenses combined with frame. $35 copay for frames and lenses OR $110 allowance for additional contacts (instead of glasses) Every calendar year
Your Monthly Premium (Out-of-pocket Premium Applies to the State of California Premier Vision Plan)	**$0.00 Employee only** **$0.00 Employee + one** **$0.00 Employee + family**	$8.63 Employee only $17.09 Employee + one $27.41 Employee + family

1. Only available to VSP members with applicable plan benefits. Frame brands and promotions are subject to change. Coverage with a retail chain may be different or not apply.

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