

VSP-2 Benefits



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In-network providers

Most eye doctors are in VSP's Signature network. Staying in-network makes sure you get the most value from your benefits and limits your out-of-pocket costs. In-network doctors bill VSP directly as a convenience to you. A directory of Signature network doctors is available at www.messa.org or www.vsp.com. Call VSP member services at 800.877.7195 for assistance.

Out-of-network providers (Maximum reimbursement to patient)

If you choose to see a doctor who is not in the VSP Signature network, your out-of-pocket costs will likely be higher and you must submit the itemized receipts to VSP for reimbursement. For more information, visit www.vsp.com or call VSP member services at 800.877.7195.

Benefit	In-network provider	Out-of-network provider maximum allowance
Examination		
■ Optometrist	\$6.50 copayment	\$28.50
■ Ophthalmologist		\$38.50
Contact lenses (includes examination)		
■ Elective lenses to improve vision	\$90 allowance	\$90
■ Medically necessary – to correct <i>keratoconus, irregular astigmatism, irregular corneal curvature or vision to 20/70 in the better eye</i>	MESSA pays 100% of the approved amount	\$175
Eyeglass frames	\$65 allowance	\$44
Eyeglass lenses		
■ Single vision		\$29
■ Bifocal	\$18 copayment	\$51
■ Trifocal		\$63
■ Lenticular		\$75
Eyeglass lens enhancements		
■ Rose #1 or #2 tint		Member must pay the difference between the approved amount and the provider charge.
■ Rimless		
■ Oversize	MESSA pays 100% of the approved amount	
■ Blended		
■ Photochromic		
■ Progressive	Not covered	
■ Tinted		
● Single vision		\$33
● Bifocal		\$61
● Trifocal		\$75
● Lenticular	MESSA pays 100% of the approved amount	\$89
■ Polarized		
● Single vision		\$47
● Bifocal		\$81
● Trifocal		\$101
● Lenticular		\$119