VSP-3 Benefits



In-network providers

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

Most eye doctors are in VSP's Signature network. Staying in-network assures that 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.

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 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	No copayment	\$35
Ophthalmologist		\$45
Contacts (includes lenses, examination and fitting)		
■ Elective lenses to improve vision	\$115 allowance	\$115
Medically necessary – to correct keratoconus, irregular astigmatism, irregular corneal curvature or vision to 20/70 in the better eye	MESSA pays 100% of the approved amount	\$200
Eyeglass frames	\$65 allowance	\$55
Eyeglass lenses		
■ Single vision		\$38
■ Bifocal	MESSA pays 100% of the approved amount	\$60
■ Trifocal		\$72
■ Lenticular		\$108
Eyeglass lens enhancements		
Rimless		
Oversized	MESSA pays 100% of the approved amount	Member must pay the difference
■ Blended		between the approved amount and the
■ Photochromic		provider charge
■ Progressive	Not covered (discounts may apply)	Not covered
■ Tinted		
Single vision		\$42
Bifocal		\$70
• Trifocal		\$84
• Lenticular	MESSA pays 100% of the approved amount	\$118
Polarized	with pays 100% of the approved amount	
Single vision Pife and		\$56
Bifocal Trifocal		\$90 \$110
Lenticular		\$110