

VSP-2 Benefits



1475 Kendale Blvd. PO Box 2560
 East Lansing, Michigan 48826-2560
 517-332-2581 • 800-292-4910

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 messa.org or 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 vsp.com or call VSP member services at 800-877-7195.

Benefit	In-network provider	Out-of-network provider maximum allowance
Examination		
<ul style="list-style-type: none"> ■ Optometrist ■ Ophthalmologist 	\$6.50 copayment	\$28.50 \$38.50
Contact lenses (includes eye exam and contact lens exam)		
<ul style="list-style-type: none"> ■ Elective lenses to improve vision 	\$90 allowance	\$90
<ul style="list-style-type: none"> ■ Medically necessary – <i>to correct 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		
<ul style="list-style-type: none"> ■ Single vision ■ Bifocal ■ Trifocal ■ Lenticular 	\$18 copayment	\$29 \$51 \$63 \$75
Eyeglass lens enhancements		
<ul style="list-style-type: none"> ■ Rose #1 or #2 tint ■ Rimless ■ Oversize ■ Blended ■ Photochromic 	MESSA pays 100% of the approved amount	Member must pay the difference between the approved amount and the provider charge.
<ul style="list-style-type: none"> ■ Progressive 	Not covered	
<ul style="list-style-type: none"> ■ Tinted <ul style="list-style-type: none"> • Single vision • Bifocal • Trifocal • Lenticular ■ Polarized <ul style="list-style-type: none"> • Single vision • Bifocal • Trifocal • Lenticular 	MESSA pays 100% of the approved amount	\$33 \$61 \$75 \$89 \$47 \$81 \$101 \$119