



## VSP Advantage Plan Professional Fee Schedule for Routine Services

**Effective Date** July 1, 2013

### Eye Exam

Exam 80% of your U&C fee up to a maximum of \$47.00

### Materials Dispensing\*

Single Vision Lenses	\$16.00
Bifocal Lenses	\$21.00
Trifocal Lenses	\$35.00
Lenticular Lenses	\$35.00
New Frame	55% of allowance less copay

### Progressive Lens Dispensing

You'll receive your bifocal dispensing fee plus the following service fees for covered progressive lenses. **The Total Reimbursement column below is the combined amount you will keep.**

- If progressives are covered, both the dispensing fee and service fee are paid by VSP.
- If progressives are not covered, see Patient Charges for Non-covered Lens Options for information on patient charges.

Bifocal Dispensing PLUS:	Progressive Lens	Service Fee	Total Reimbursement
	Category N	\$80.00	\$101.00
	Category O	\$71.00	\$92.00
	Category F	\$51.00	\$72.00
	Category J	\$49.00	\$70.00
	Category K	\$27.00	\$48.00

### Patient Charges for Non-covered Lens Options

Charge the patient the lesser of 80% of your usual and customary (U&C) add-on fee or the [VSP Advantage Plan Options Chart](#) amount, effective July 1, 2013. For options not listed, charge 80% of your U&C add-on fee. For non-covered options, the charge back amount will be deducted from your VSP payment. You will not be charged for covered options.

### Frame Allowances and Overages

When the frame exceeds the retail allowance, charge the patient 80% of the retail price exceeding the allowance.

\*Please note that how materials dispensing fees are calculated for the VSP Advantage Plan has changed. Previously, your practice was responsible for paying lab fees and your dispensing fees included materials fees. VSP will now pay the lab fees for VSP Advantage Plan patients on your behalf, and the materials fees will no longer be included with your dispensing fees.