



## VSP Advantage Network – VSP Enhanced Advantage Plan<sup>SM</sup> Professional Fee Schedule for Routine Services

**Effective Date** December 31, 2023

### 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            | \$19.00 |

### Progressive Lens Dispensing

You will receive your bifocal dispensing fee PLUS the applicable service fees for covered and non-covered progressives. Service fees are subject to change and may be found in the VSP Enhanced Advantage Plan Lens Enhancement Chart. If covered, both the dispensing and applicable service fee are paid by VSP. If progressives are not covered, see Patient Copay column for information on patient charges.

### Patient Charges for Non-covered Lens Enhancements

Charge the patient the lesser of 80% of your usual and customary (U&C) add-on fee or the VSP Enhanced Advantage Plan Lens Enhancement Chart amount. For non-covered lens enhancements, the charge back amount will be deducted from your VSP payment. You will not be charged for covered lens enhancements.

### Frame Allowances and Overages

Under the Enhanced Advantage Plan, your patient's frame allowance is represented by a combination of the wholesale frame amount and corresponding retail amount for which your patient is covered. You receive your frame dispensing and the wholesale cost up to their wholesale allowance, plus collect any overage according to our frame overage procedures. When the selected frame exceeds both the wholesale and equivalent retail allowance coverage, your patient is responsible for the overages exceeding their retail frame allowance at 80% of U&C.

For Advantage Plan members, Essentials Plan members and some VSP members whose coverage is under certain, specific client groups, other reimbursement rates may apply. For a listing of such rates, which are hereby incorporated by reference, please refer to VSP's Provider Reference Manual.