## **Submitting an Out-of-Network Claim**

If your plan provides out-of-network benefits, you will need to submit the claim to VSP for reimbursement.

## Information

## Details

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Not all VSP plans provide out-of-network benefits	<ul> <li>Visit the <u>Benefits &amp; Claims</u> section of <u>vsp.com</u> to see if your plan offers coverage for out-of-network providers.</li> <li>If your plan provides out-of-network benefits and you choose to see an out-of-network provider, you will need to submit the claim to VSP for reimbursement.         <ul> <li>If you choose to see an out-of-network provider, your benefit may differ from the coverage you receive with a VSP doctor.</li> <li>You can view your benefits with out-of-network providers by clicking on the <u>Benefits &amp; Claims</u> tab.</li> </ul> </li> <li>VSP will reimburse you the allotted amount based on your out-of-network benefits.</li> </ul>
What you'll need	<ul> <li>To submit a claim, you will need a copy of the itemized receipts or service statements for each patient that includes the following information printed on them:         <ul> <li>doctor's name or office name</li> <li>name of patient</li> <li>date of service</li> <li>each service received and the amount paid.</li> </ul> </li> <li>You typically have twelve months from the date of service to submit for reimbursement.</li> </ul>
Submitting a Claim Online	<ul> <li>Be sure your receipts have been scanned and are accessible by your computer.</li> <li>Login to your vsp.com account and access the Benefits &amp; Claims section</li> <li>Click on "Start New Claim"</li> <li>Complete the fields and follow the prompts</li> <li>Upload your receipts</li> </ul>
Submitting a Claim by Mail	<ul> <li>You can also send your receipts by mail.</li> <li>Access the <u>Benefits &amp; Claims</u> section for details.</li> <li>Click on "Start New Claim".</li> <li>Complete the fields and follow the prompts.</li> </ul>

	<ul> <li>After completing the claim form, you may print and mail copies of your claim form and receipt(s) to:         Vision Service Plan         Attention: Claims Services         P.O. Box 385018         Birmingham, AL 35238-5018     </li> </ul>
Submitting a Claim & I'm No Longer a VSP Member	<ul> <li>Contact VSP member services a t 1.800.877.7195 and ask for a Member Reimbursement form (VSP Out-Of-Network form).</li> <li>Send the form <u>and</u> a copy of your receipts to:         <ul> <li>Vision Service Plan</li> <li>Attention: Claims Services</li> <li>P.O. Box 385018</li> <li>Birmingham, AL 35238-5018</li> </ul> </li> </ul>
Processing Your Claim	<ul> <li>Please allow up to 10 business days (plus mailing time to and from VSP) for us to process your out-of-network reimbursement.</li> <li>You can follow the My Claim Status online by accessing the Previous Doctor Visits section under Claims &amp; Reimbursements.</li> </ul>