MESSA Vision Preferred Benefits

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Effective Date: 11/1/2025

MESSA Account: Potterville Public Schools

Employee Group: 825C APA-Eaton All Employees

In-network providers

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

Most eye doctors are in VSP's Choice 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 Choice network doctors is available at messa.org or 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 Choice 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		
Optometrist Ophthalmologist	MESSA pays 100% of the approved amount	\$45
Contact lenses (includes contact lens examination) *		
Elective lenses to improve vision	\$135 allowance	\$105
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	\$210
Eyeglass frames	\$135 allowance	\$70
Eyeglass lenses Single vision Bifocal Trifocal Lenticular	MESSA pays 100% of the approved amount	\$30 \$50 \$65 \$100
Eyeglass lens enhancements Rose #1 or #2 tint Rimless Oversize Blended Photochromic Anti-reflective coating	MESSA pays 100% of the approved amount	Not covered
Progressive	Not covered	
Tinted Single vision Bifocal Trifocal Lenticular Polarized Single vision Bifocal	MESSA pays 100% of the approved amount	Not covered
Trifocal Lenticular		

^{*} The cost of the eye exam is covered separately and does not count against the contact lens allowance.