



How to submit an Out of Network Claim

Your benefits will always go further when you see an in-network doctor. However, if you'd like to submit an out-of-network claim, be sure to answer all the questions and attach any receipts related to your claim.

To submit a Claim request, you'll need the following:

1. Copies of the itemized receipts or statements that include:
 - Doctor name or office name
 - Name of Patient
 - Date of Service
 - Each service received and the amount paid
2. 5 to 10 minutes to complete the claim form.
3. After completing the claim form, you may attach your receipt(s) or 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

Tip: Missing information and receipts can delay your reimbursement. Fill out the form completely and snap a picture of your receipt and attach it to your claim to get your reimbursement faster. If you have receipts for other claims you must complete a separate claim form.

Don't like filling out forms? Neither do we! That's why we make it easy to get the most out of your benefit simply by seeing an in-network doctor. There are no claim forms to fill out when you see a VSP network doctor. Before your next visit, find a conveniently located [VSP network doctor](#) to help keep your eyes healthy and your wallet happy.



Please Note: If you received services and/or products from different out-of-network providers, you must complete a claim form for each location. You typically have 12 months from the date of service to submit a claim for reimbursement. If you don't submit your claim within 12 months of the date of service, your claim may be denied. Please allow up to 10 business days (plus mailing time to and from VSP) for us to process your reimbursement.