

INTERIM BENEFITS

Interim Benefits covers services or materials for your patients when they're not eligible for services or materials under the core plan, and there's a significant prescription change. Interim benefits criteria may vary from client to client. Check your patient's interim benefits by calling VSP at **800.615.1883** before providing services or materials. Interim Benefits may be covered for exam, frame, and additional pairs of lenses, including elective contact lenses.

Exam	Lenses	Frames
Exams are approved only if your patient has interim benefits for exams and the change in prescription meets the criteria outlined under " Lenses. "	New lenses are allowed if: <ul style="list-style-type: none"> • your patient has interim benefits; • your patient meets the criteria for interim lens coverage; • you've received authorization for interim lenses. 	A new frame is allowed only if your patient has interim benefits for frames and interim lenses have been approved. Depending on your patient's coverage, frame benefits may be limited to lost or broken frames, or to prescription changes requiring a frame of a different shape or size. If a frame is approved, the benefit is limited to your patient's core plan wholesale/retail frame allowance.

Inform your patients that they must pay for services and/or materials provided if they:

- Don't qualify for the services or materials requested;
- Don't have interim benefits for the services or materials requested;
- Have interim benefits but don't meet the interim services/materials criteria;
- Have recently received laser vision correction surgery, as they are not entitled to use Interim Benefits.

Contact VSP at **800.615.1883** to obtain an authorization for interim benefits. You may need your patient's previous and new prescription, plus the current visual acuity achieved with each prescription. If approved, you'll get an authorization number.

REPAIR/REPLACE BENEFITS

Repair/Replace Benefits cover materials your patients get when they're not eligible for materials under their core plan. Refer to the Patient Record Report to determine if the patient is eligible for repair or replacement coverage. Patients are eligible if their spectacle lenses or frames are broken or damaged and need repair or replacement.

It also covers materials your patients receive when they're not eligible for materials under the core plan and they can no longer use their glasses.