



2023 VISION PLAN DECISION GUIDE

Blue Cross Vision

Small Group

Blue Cross Vision: A clear choice

Help keep your employees healthy with a vision plan from Blue Cross and Blue Shield of Minnesota.

FOCUS ON PREVENTION

More than 90 million Americans over 40 have vision and eye problems.¹ Offering a vision plan that includes an eye exam helps promote good overall health to your employees. Regular preventive exams can lead to early detection of chronic conditions like high blood pressure, diabetes, multiple sclerosis, thyroid disease and diabetic retinopathy. And when these issues are caught early, they're easier and less costly to treat.

ADULTS has at least one chronic health issue that an eye exam can help detect.²

WHAT'S INCLUDED?

Blue Cross offers a variety of vision plans with benefit levels that best meet your employees' needs and your budget. All plans offer:

- No waiting periods
- Traditional LASIK discounts of up to 50 percent³
- Blue light lens coverage
- Coverage for scratch-resistant coating and tinting of plastic lenses
- Enhanced benefits including an additional \$50 frame allowance at all Visionworks locations
- Discounts on the Davis Vision Exclusive Collection (private practice providers)

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THE BLUE CROSS DIFFERENCE

When you choose Blue Cross, members get these exclusive benefits:

- Fixed lens pricing on all plans members pay the same on all lens options no matter where they go in network
 - An average retail savings of 62 percent on all lens options⁴
- Free one-year breakage warranty
- Discounts on a second pair of eyewear with in-network providers

EXAMPLE MEMBER SAVINGS OF \$351					
Exam and eyewear	Retail cost (average)	Member cost			
Eye examination	\$103	\$10			
Davis Vision Exclusive Collection frame (Designer tier)	\$160	\$0			
Single vision lenses	\$78	\$10			
One-year breakage warranty	\$30	\$0			
Total:	\$371	\$20			

⁴Blue Cross Internal Data, Utilization Report, May 2022 (based on January to December 2021 data).

Each vision provider is an independent contractor and not our agent. It is up to the member to confirm provider participation in their network prior to receiving services.

¹Centers for Disease Control and Prevention, 2021.

²Centers for Disease Control and Prevention, 2015.

³Laser vision correction services administered by QualSight, LLC[®]. Terms and savings are subject to change. QualSight is an independent company that does not offer Blue Cross products or services. QualSight is solely responsible for its products and services.



EASY ACCESS TO A NATIONAL NETWORK

Blue Cross Vision plans use the Davis Vision network, a national network of private practices and retail locations that include ophthalmologists and optometrists.¹ Members have more than 1,900 access points in Minnesota and more than 124,000 access points nationally.³ Some of the retail locations and online providers include:

RETAIL LOCATIONS

ONLINE PROVIDERS

1800Contacts.com

- Target OpticalPearle Vision
- glasses.com

befitting.com

- America's Best
- JCPenney Optical
- Shopko Optical

MEMBER SUPPORT

- Call centers staffed seven days a week with voice response system support 24 hours a day
- 100 percent of calls and claims are administered in the U.S.

Members can find an in-network provider when they visit **bluecrossmn.com/findaneyedoctor**. When searching for a provider, members can filter the search based on specialty, where the provider is located, what collections they offer and types of discounts.



¹Davis Vision is an independent company providing vision benefit management services and access to the Davis network. ²Retail partners of Davis Vision. ³Davis Vision, 2022.

Enhance your benefits package with Blue Cross Vision plans

EYEWEAR ONLY PLANS

Provides coverage for eyeglasses, lenses, frames, lens enhancements and contacts.

EXAM AND EYEWEAR PLANS

Provides coverage for eyeglasses, lenses, frames, lens enhancements, contacts and routine eye exams with dilation.

FREQUENTLY ASKED QUESTIONS

Do my medical plan and my stand-alone vision plan use the same network?

Your medical plan and your vision plan have two different networks.

How can I find a provider in the Davis Vision network?

To find an in-network vision provider, visit **bluecrossmn.com/findaneyedoctor**.

Minnesota				
Find an eye care provider				
rou can find eye care providers in the Blue Cross Vision plan network here. (You have a v Blue Cross Vision plan member ID card.)	rision plan if you h	ave a	separ	ate
iote: Be sure to check your vision plan materials to see what services are covered. Finding a provider in your network does	n't guarantee that service	es are o	overed.	
ister. De sure to check your vision plan materials to see what services are covered. Finding a provider in your retrixorit does SEARCH FOR AN EVE CARE PROVIDER OF	n't guarantee that servic	es are o	overed.	
	n't quarantee that servio	f	in	0

What is the Davis Vision Exclusive Collection of frames?

A collection of more than 200 frames valued up to \$195. A member can choose from the Fashion, Designer or Premier levels. This collection is available at most in-network private practice providers. If a member chooses not to purchase from the collection, they can still use the frame allowance.

Where can a member find the non-Davis Vision Exclusive Collection of frames?

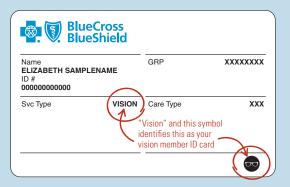
This collection is available at in-network providers. The frame allowance will be higher when frames are purchased from a Visionworks store. The increased frame allowance will be applied automatically.

What is the difference between Davis Vision Collection contact lenses and non-collection?

Collection contact lenses can be found at many in-network private practice providers. Non-collection lenses are available at all in-network retail providers. Both include popular contact lens brands.

Is there a separate vision member ID card?

Yes, each member will receive a separate vision ID card. The vision ID card contains the identifier "Vision" under service type and an eyeglass icon.



	EYEWEAR ONLY						
	Value Enhanced Premier Enhanced						
MOST POPULA	B Option 1	Option 2	Option 1	Option 2			
-		In-netwo	rk benefit		Out-of-network reimbursements		
EYE EXAM					Frames: \$50		
Eye exam	Exam not covered Exam not covered				Lenses:		
PRESCRIPTION GLASSES – Benefit av	vailable for eyeglass le	enses <i>or</i> contact lense	s once every 12 months		- Single vision: \$40 - Bifocal/progressiv		
L enses - Single vision, lined bifocal, trifocal, lenticular	100% after \$10 copay		100% after \$10 copay		\$60 - Trifocal: \$80 - Lenticular: \$100		
Frames wo frame frequency options available under each plan	1 every 12 months	1 every 24 months	1 every 12 months	1 every 24 months	Contact lenses: - Elective: \$105 - Visually required:		
Davis Vision Exclusive Collection* - Fashion level - Designer level - Premier level	100%; no 100%; no 100%; \$2	o copay	100%; no copay 100%; no copay 100%; no copay 100%; no copay		\$225		
Non-Davis Vision Exclusive Collection - Visionworks stores	No copay; plan p plus 20% discount o	n remaining costs**	plus 20% discount	pays up to \$200 on remaining costs**			
- Frames available from other participating retailers	No copay; plan p plus 20% discount o			pays up to \$150 on remaining costs**			
YEGLASS ENHANCEMENTS							
 Tinting of plastic lenses Scratch-resistant coating Polycarbonate lenses Dependent children, monocular patients and those with a prescription 	Member pays \$0 Standard: \$0 / Premium: \$30 Member pays \$0				*Davis Vision Exclusive Collectio		
of +/- 6.00 diopters or greater - Adults - Ultraviolet coating - Anti-reflective coating	Member pays \$30 Member pays \$12 Standard: \$35 / Premium: \$48 / Ultra: \$60 / Ultimate: \$85			available at most participating independent provider offices. Collection is subject to change.			
- Blue light filtering - Progressive lenses - High-index lenses	Member pays \$15 Standard: \$50 / Premium: \$90 / Ultra: \$140 / Ultimate: \$175			**Additional discount not available at Costco, Walmart, Sam's Club or			
- Polarized lenses - Plastic photochromic lenses - Scratch protection plan	Member pays \$55 / \$120 Member pays \$75 Member pays \$65 Single vision: \$20 /			participating online vision providers. †Available at most			
	Multifocal vision: \$40			participating independent			
CONTACT LENSES – Benefit available f	for eyeglass lenses <i>or</i>	contact lenses once e	very 12 months		provider offices. Collection is		
Collection contact lenses ⁺ Disposable Non-disposable	up to 4 up to 2			3 boxes 4 boxes	subject to change. ††Available in participating retail		
- Evaluation, fitting and follow-up care	100% after	\$10 copay	100% after	* \$10 copay	locations. These plans		
lon-collection contact lens llowance ^{††}	Plan pays up 15% discount on r			to \$150 plus remaining costs**	provide vision coverage only. The vision plan's		
Evaluation, fitting and follow-up care for standard lenses	100% after \$10 copay 100% after \$10 copay				benefit booklet will contain more details on standard		
- Evaluation, fitting and follow-up care for specialty lenses	\$10 copay; after cop \$60 plus 15% discount	bay, plan pays up to on remaining costs**	\$10 copay; after co \$60 plus 15% discour	pay, plan pays up to It on remaining costs**	plan exclusions and frequency limitations. In		
Visually required contact lenses preauthorization required) - Materials	100	%	10	0%	the event of a discrepancy, the benefit booklet will supersede		
- Evaluation, fitting and follow-up care	100	%	10	0%	this summary.		

	EXAM AND EYEWEAR						
	Value Standard		Premier Enhanced				
MOST POPUL	R Option 1	Option 2	Option 1	Option 2			
-		In-netwo	rk benefit		Out-of-network reimbursements		
EYE EXAM — One exam every 12 months	;				Eye exam: \$40, if applicable		
Eye exam - Includes dilation when recommended by eye care professional	100% after \$10 copay 100% after \$10 copay		Frames: \$50				
PRESCRIPTION GLASSES – Benefit av	vailable for eveglass l	enses <i>or</i> contact lenses	once everv 12 months		- Single vision: \$40		
Lenses - Single vision, lined bifocal, trifocal, lenticular	100% after \$25 copay		100% after \$10 copay		- Bifocal/progressive \$60 - Trifocal: \$80 - Lenticular: \$100		
Frames Two frame frequency options available under each plan	1 every 12 months	1 every 24 months	1 every 12 months	1 every 24 months	Contact lenses: - Elective: \$105		
Davis Vision Exclusive Collection* - Fashion level - Designer level - Premier level	100%; n	100%; no copay 100%; \$25 copay		io copay	- Visually required: \$225		
Non-Davis Vision Exclusive Collection - Visionworks stores		pays up to \$180 on remaining costs**		pays up to \$200 on remaining costs**			
 Frames available from other participating retailers 	No copay; plan	pays up to \$130 on remaining costs**	No copay; plan	pays up to \$150 on remaining costs**			
EYEGLASS ENHANCEMENTS					[
- Tinting of plastic lenses - Scratch-resistant coating - Polycarbonate lenses	Member pays \$0 Standard: \$0 / Premium: \$30						
 Dependent children, monocular patients and those with a prescription of +/- 6.00 diopters or greater Adults 	Member pays \$0 Member pays \$30 Member pays \$12 Standard: \$35 / Premium: \$48 / Ultra: \$60 / Ultimate: \$85 Member pays \$15 Standard: \$50 / Premium: \$90 / Ultra: \$140 / Ultimate: \$175			*Davis Vision Exclusive Collection available at most participating			
- Ultraviolet coating - Anti-reflective coating				independent provider offices. Collection is subject to change.			
- Blue light filtering - Progressive lenses				**Additional discount not available at Costco, Walmart,			
- High-index lenses - Polarized lenses		Member pay Member			Sam's Club or participating online		
- Plastic photochromic lenses	Member pays \$75 Member pays \$65				vision providers. †Available at most		
- Scratch protection plan	Single vision: \$20 / Multifocal vision: \$40			participating independent			
CONTACT LENSES – Benefit available 1	for eyeglass l <u>enses <i>ol</i></u>	r contact <u>lenses once ev</u>	very 12 months		provider offices. Collection is		
Collection contact lenses [†] - Disposable - Non-disposable	up to 4 boxes up to 2 boxes up to 2 boxes up to 4 boxes		subject to change. ††Available in participating retail				
- Evaluation, fitting and follow-up care	· · · · · ·	\$25 copay	100% after	•••••••••••••••••••••••••••••••••••••••	locations.		
Non-collection contact lens allowance ^{††}	Plan pays up	to \$130 plus remaining costs**	Plan pays up 15% discount on	These plans provide vision coverage only. The vision plan's			
- Evaluation, fitting and follow-up care for standard lenses	100% after	\$25 copay	100% after	benefit booklet will contain more details on standard			
- Evaluation, fitting and follow-up care for specialty lenses	\$25 copay; after co \$60 plus 15% discoun	ppay, plan pays up to it on remaining costs**	\$10 copay; after co \$60 plus 15% discoun	plan exclusions and frequency limitations. In			
Visually required contact lenses (preauthorization required) - Materials	101	0%	% 100%				
- Evaluation, fitting and follow-up care	101	0%	10)%	will supersede this summary.		

FOCUS ON FLEXIBILITY

Blue Cross Vision plans are designed to meet your needs. Plans can be:

- Offered with or without eye exam benefits
- Offered on a voluntary and nonvoluntary basis (choose to fund all, some or none of the premium)
- Purchased on their own or with a Blue Cross health plan for administrative ease

UNDERWRITING GUIDELINES

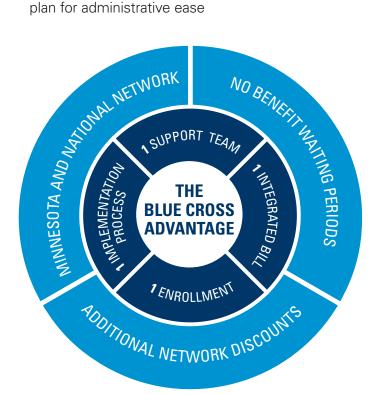
For groups with two to 50 employees:

- Minimum enrollment requirement of two contracts
- No minimum employer contribution plans can be offered as voluntary or nonvoluntary
- Rates include 10 percent commission
- Group must be headquartered in Minnesota

WE'RE HERE WITH PERSONALIZED HELP

For more information or help choosing the best vision plan for you and your employees:

- Contact your agent or Blue Cross representative
- Visit bluecrossmn.com/visionplans





Blue Cross and Blue Shield of Minnesota is dedicated to ensuring everyone has access to quality, affordable health care. That commitment began when we became one of the nation's founding health plans 90 years ago and continues to drive us today.

You and Blue.[™] Better together.

