

**Blue Cross Vision Plans**  
**Individual and Family Plan Rates**  
**January – December 2025**



Family Size	Value Plan Annual Premium	
	Value Standard with Exam	Value Eyewear Only
Individual	\$98.33	\$89.96
Individual with one dependent	\$169.01	\$154.53
Individual with two or more dependents	\$253.16	\$230.83

**Eligibility Requirements:**

- Contract holder must have Minnesota residency. The residency policy may be found at [bluecrossmn.com/residencypolicy](http://bluecrossmn.com/residencypolicy).
- Contract holder must be 18 years. No child-only contracts.
- Premium is billed on an annual basis (no exceptions).
- The annual premium can be paid at the time of application or will be billed upon enrollment.
- Effective date is generally the first of the month following receipt of application.
- Standard Blue Cross and Blue Shield of Minnesota policies and procedures and exclusions and limitations apply.