



2025

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

An estimated 93 million adults in the United States are at high risk for serious vision loss, but only half visited an eye doctor in the past 12 months.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.



AMERICANS

says an eye health professional detected or diagnosed a non-eye-related health issue.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
- LASIK discounts available through QualSight, LLC³
- 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
- Davis Vision Exclusive Collection frames and contact lenses

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 63 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 \$363

| Exam and eyewear | Retail cost (average) | Member cost |
|---|-----------------------|-------------|
| Eye examination | \$115 | \$10 |
| Davis Vision Exclusive Collection frame (Designer tier) | \$160 | \$0 |
| Single vision lenses | \$78 | \$10 |
| One-year breakage warranty | \$30 | \$0 |
| Total: | \$383 | \$20 |

¹Centers for Disease Control and Prevention, 2022.

²American Optometric Association Eye-Q Survey, 2020.

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.

⁴Blue Cross Internal Data, 2024.

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.



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 2,700 access points in Minnesota and more than 158,000 access points nationally.³ Some of the retail locations and online providers include:

RETAIL LOCATIONS

- Target Optical
- Pearle Vision
- America's Best
- JCPenney Optical
- Shopko Optical

ONLINE PROVIDERS

- 1800Contacts.com
- glasses.com
- befitting.com
- Warby Parker

MEMBER SUPPORT

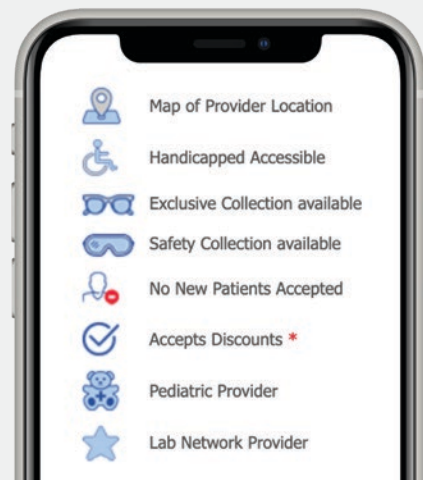
- Call centers staffed seven days a week with voice response system support 24 hours a day
- 100 percent of calls and claims are administered in the United States

4 OUT OF **5** 

TOP OPTICAL RETAILERS PARTICIPATE

including Visionworks, Costco, Walmart and Sam's Club²

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, 2024.

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.

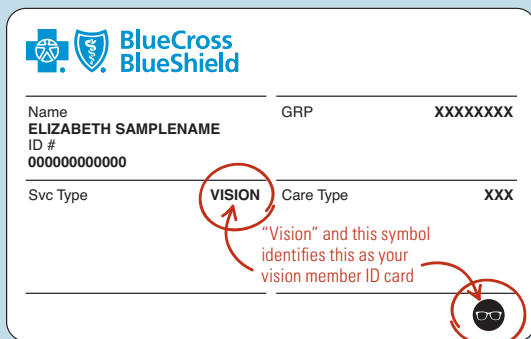
FREQUENTLY ASKED QUESTIONS

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

No, medical plans and vision plans each have their own network.

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.



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

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

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 many 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 use their frame allowance?

Members can use their frame allowance at any in-network provider. The frame allowance will be \$50 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.

| EYEWEAR ONLY | | | | | Out-of-network reimbursements |
|---|---|-------------------|--|--------------------|---|
| Value Enhanced | | Premier Enhanced | | In-network benefit | |
| Option 1 | Option 2 | Option 1 | Option 2 | | |
| EYE EXAM | | | | | |
| Eye exam | Exam not covered | | Exam not covered | | Exam not covered |
| PRESCRIPTION GLASSES – Benefit available for eyeglass lenses <i>or</i> contact lenses once every 12 months | | | | | |
| Lenses¹ - Single vision, lined bifocal, trifocal, lenticular | 100% after \$10 copay | | 100% after \$10 copay | | Single vision: \$40 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 | \$50 |
| Davis Vision Exclusive Collection² - Fashion level - Designer level - Premier level | 100%; no copay 100%; no copay 100%; \$25 copay | | 100%; no copay 100%; no copay 100%; no copay | | |
| Non-Davis Vision Exclusive Collection - Visionworks stores - Frames available from other participating retailers | No copay; plan pays up to \$180 plus 20% discount on remaining costs ³ No copay; plan pays up to \$130 plus 20% discount on remaining costs ³ | | No copay; plan pays up to \$200 plus 20% discount on remaining costs ³ No copay; plan pays up to \$150 plus 20% discount on remaining costs ³ | | |
| EYEGLASS ENHANCEMENTS | | | | | |
| - Tinting of plastic lenses - Scratch-resistant coating - Polycarbonate lenses - Dependent children, monocular patients and those with a prescription of +/- 6.00 diopters or greater - Adults - Ultraviolet coating - Anti-reflective coating - Blue light filtering - Progressive lenses - High-index lenses - Polarized lenses - Plastic photochromic lenses - Scratch protection plan | Member pays \$0 Standard: \$0 / Premium: \$30 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 Member pays \$55 / \$120 Member pays \$75 Member pays \$65 Single vision: \$20 / Multi-focal vision: \$40 | | | | Not covered |
| CONTACT LENSES – Benefit available for eyeglass lenses <i>or</i> contact lenses once every 12 months | | | | | |
| Collection contact lenses⁴ - Disposable - Planned replacement | up to 4 boxes up to 2 boxes | | up to 8 boxes up to 4 boxes | | Not applicable |
| - Evaluation, fitting and follow-up care | 100% after \$10 copay | | 100% after \$10 copay | | Not applicable |
| Non-collection contact lens allowance⁵ | Plan pays up to \$130 plus 15% discount on remaining costs ³ | | Plan pays up to \$150 plus 15% discount on remaining costs ³ | | \$105 |
| - Evaluation, fitting and follow-up care for standard lenses | 100% after \$10 copay | | 100% after \$10 copay | | Not covered |
| - Evaluation, fitting and follow-up care for specialty lenses | \$10 copay; after copay, plan pays up to \$60 plus 15% discount on remaining costs ³ | | \$10 copay; after copay, plan pays up to \$60 plus 15% discount on remaining costs ³ | | Not covered |

MOST POPULAR

¹This plan covers a wide variety of lenses. Members should ensure the lenses they choose are covered by the plan. Eye care/eyewear providers can assist with this, or members can contact customer service at the number on the vision member ID card.

²Davis Vision Exclusive Collection available at many participating independent provider offices. Collection is subject to change.

³Additional discount not available at Costco, Walmart, Sam's Club or participating online vision providers.

⁴Available at many participating independent provider offices. Collection is subject to change. Boxes must be ordered as part of a single transaction.

⁵Available in participating retail locations.

These plans provide vision coverage only. The vision plan's benefit booklet will contain more details on standard plan exclusions and frequency limitations. In the event of a discrepancy, the benefit booklet will supersede this summary.

EXAM AND EYEWEAR

| | Value Standard | | Premier Enhanced | | Out-of-network reimbursements |
|---|--|---|---|-------------------|---|
| | Option 1 | Option 2 | Option 1 | Option 2 | |
| | In-network benefit | | | | |
| EYE EXAM – One exam every 12 months | | | | | |
| Eye exam - Includes dilation when recommended by eye care professional | 100% after \$10 copay | | 100% after \$10 copay | | \$40 |
| PRESCRIPTION GLASSES – Benefit available for eyeglass lenses <i>or</i> contact lenses once every 12 months | | | | | |
| Lenses¹ - Single vision, lined bifocal, trifocal, lenticular | 100% after \$25 copay | | 100% after \$10 copay | | Single vision: \$40 Bifocal/progressive: \$60 Trifocal: \$80 Lenticular: \$100 |
| Frames Two frame frequency options available under each plan Davis Vision Exclusive Collection² - Fashion level - Designer level - Premier level Non-Davis Vision Exclusive Collection - Visionworks stores - Frames available from other participating retailers | 1 every 12 months 100%; no copay 100%; no copay 100%; \$25 copay | 1 every 24 months 100%; no copay 100%; no copay 100%; no copay | 1 every 12 months 100%; no copay 100%; no copay 100%; no copay | 1 every 24 months | \$50 |
| EYEGLOSS ENHANCEMENTS | | | | | |
| - Tinting of plastic lenses - Scratch-resistant coating - Polycarbonate lenses - Dependent children, monocular patients and those with a prescription of +/- 6.00 diopters or greater - Adults - Ultraviolet coating - Anti-reflective coating - Blue light filtering - Progressive lenses - High-index lenses - Polarized lenses - Plastic photochromic lenses - Scratch protection plan | Member pays \$0 Standard: \$0 / Premium: \$30 Member pays \$0 | | 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 Member pays \$55 / \$120 Member pays \$75 Member pays \$65 Single vision: \$20 / Multi-focal vision: \$40 | | Not covered |
| CONTACT LENSES – Benefit available for eyeglass lenses <i>or</i> contact lenses once every 12 months | | | | | |
| Collection contact lenses⁴ - Disposable - Planned replacement | up to 4 boxes up to 2 boxes | | up to 8 boxes up to 4 boxes | | Not applicable |
| - Evaluation, fitting and follow-up care | 100% after \$25 copay | | 100% after \$10 copay | | Not applicable |
| Non-collection contact lens allowance⁵ - Evaluation, fitting and follow-up care for standard lenses | Plan pays up to \$130 plus 15% discount on remaining costs ³ 100% after \$25 copay | | Plan pays up to \$150 plus 15% discount on remaining costs ³ 100% after \$10 copay | | \$105 |
| - Evaluation, fitting and follow-up care for specialty lenses | \$25 copay; after copay, plan pays up to \$60 plus 15% discount on remaining costs ³ | | \$10 copay; after copay, plan pays up to \$60 plus 15% discount on remaining costs ³ | | Not covered |

¹This plan covers a wide variety of lenses. Members should ensure the lenses they choose are covered by the plan. Eye care/eyewear providers can assist with this, or members can contact customer service at the number on the vision member ID card.

²Davis Vision Exclusive Collection available at many participating independent provider offices. Collection is subject to change.

³Additional discount not available at Costco, Walmart, Sam's Club or participating online vision providers.

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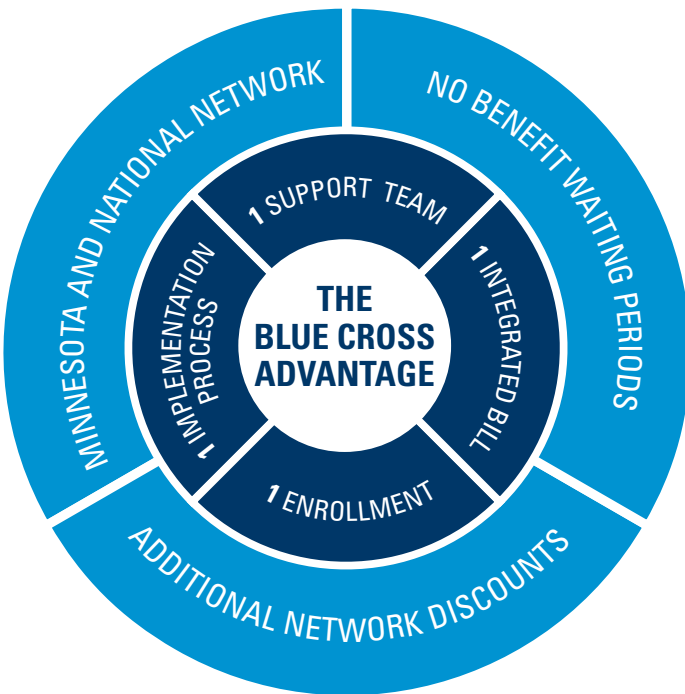
⁵Available in participating retail locations.

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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
- 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 healthcare. That commitment began when we became one of the nation's founding health plans more than 90 years ago and continues to drive us today.

You and Blue.SM Better together.