

# VISION PLAN

## BLUE VIEW VISION

100% PARTICIPATION AS A "STAND ALONE" PLAN OR

Vision Enrollment matches Medical

Blue View Vision, a division of Anthem Blue Cross, has an extensive nationwide network of private practice doctors and retail optical specialists who provide exceptional care and eyewear to persons covered under this plan. The plan is designed to encourage you to maintain your vision through eye exams and to help with vision care expenses for required glasses or contact lenses.

Blue View Vision is available as a "stand alone" plan with 100% participation or in conjunction with medical plan coverage. If written in conjunction with medical coverage, the vision enrollment must match the medical enrollment, including dependents, regardless of the medical plan chosen.

Please call the phone number listed on the front cover of this booklet for rates and additional information.

BENEFITS	CO-PAY	FREQUENCY	OUT-OF-NETWORK REIMBURSEMENT
<b>EXAM</b>	\$10	Once every 12 months *	Up to \$45
<b>LENSES<sup>1</sup></b>			
Single Vision Lenses	\$25	Once every 12 months *	Up to \$45
Lined Bifocal Lenses	\$25	Once every 12 months *	Up to \$65
Lined Trifocal Lenses	\$25	Once every 12 months *	Up to \$85
Progressive Lenses	\$25 + \$65	Once every 12 months *	Up to \$49
<i><sup>1</sup> All lenses include a \$25 material co-pay that is applied once per service year toward your lenses or contacts.</i>			
<b>FRAME</b>	No co-pay applies	Once every 24 months *	Up to \$47
<i>Frame of your choice covered up to \$120. Plus, 20% off any out-of-pocket costs.</i>			
<b>CONTACTS</b> (in lieu of frame and lens benefit)	No co-pay applies	Once every 12 months *	Up to \$105
<i>Contacts may be chosen instead of prescription glasses. An allowance of \$120 will be provided towards the cost of your contact lens fitting, evaluation and materials. Any costs exceeding the allowance are the responsibility of the patient.</i>			
<i>Contact lens frequency is the same as lenses. Under this plan, if you choose, you will be eligible for a frame 24 months after the last date of obtaining contacts.</i>			

\* From last date of service

### LENSES FOR CHILDREN UNDER THE AGE OF 18

In addition to the standard lens allowance, Blue View Vision covers polycarbonate lenses for children under the age of 18. Polycarbonate lenses are now becoming the industry standard for children due to safety reasons.

### SERVICES FROM A BLUE VIEW NETWORK DOCTOR OR RETAIL SPECIALIST

Blue View Vision offers you additional savings of up to 40% on extra eyewear, certain non-prescription sunglasses and other popular accessories. There is no limit to the number of purchases you can make using this great savings opportunity - even after you've exhausted your covered vision benefits.

<b>EXTRA EYEGLASSES</b>	40% off retail
<b>CONVENTIONAL CONTACT LENSES</b>	15% off retail (applied to materials only)
<b>EYEWEAR ACCESSORIES</b>	20% off retail
<i>Includes certain non-prescription sunglasses, lens cleaning supplies, contact lens solutions, eyeglass cases, etc.</i>	

# VOLUNTARY VISION PLAN

## BLUE VIEW VISION

100% Employee Paid

The Voluntary Blue View Vision plan is available for all active full-time owners and employees. The benefits are the same as the group plan but the rates are higher. This is a voluntary individual plan, paid 100% by the employee through a payroll deduction.

Please call the phone number listed on the front cover of this booklet for rates and additional information.

*To find a Blue View Vision provider, visit [www.anthem.com/ca/](http://www.anthem.com/ca/) or call (866) 723-0515.*

This is only a summary and there may be details not included, the Blue View Vision Evidence of Coverage document supersedes any omissions or discrepancies in these plan descriptions. Blue View Vision's Evidence of Coverage for these Plans may be found online (see page 30)