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Blue Cross® Vision for Adults

2018 plan year

Overview

About this plan

Complete your health care with a plan that provides adult vision care. You'll be covered for eye exams as well as glasses or contacts, with out-of-network coverage and copays starting at \$15.

Availability

You can buy this plan if you live in any Michigan county.

Blue Cross Vision for Adults is not available on healthcare.gov. It's available for purchase year-round and doesn't require a qualifying life event to enroll mid-year.

Plan type

VSP. For vision care, you can go to any eye doctor and this plan will share the cost. But you'll pay less if you see a [VSP eye doctor](#).

Who's covered

This plan covers vision care for adults age 19 and older as of plan effective date. Why doesn't it cover children? Because of health care reform, all medical plans you purchase yourself must include pediatric vision care.

Monthly premiums

To give you an accurate price, we'll need some information. [Find a plan](#) to get a quote.

Coverage and costs

Coverage includes:

One eye exam each calendar year

One pair of standard frames every calendar year

You choose between coverage for prescription glasses (lenses and frame) or contact lenses, but not both:

Contacts covered once each calendar year, or

One pair of standard lenses covered once each calendar year

Costs include:

Copay starts at \$15 for an eye exam by an in-network provider.

If you go to an in-network provider the copay for glasses starts at \$25 and you have a \$150 allowance for frames or elective contact lenses.

See vision tab for details.

Related documents

For even more details about this plan, see the [Vision for Adults Certificate of Coverage \(PDF\)](#).

Certificates are legal documents that describe the benefits of a health insurance plan. Your plan might have different benefits and limitations than those listed in this document.

Benefits

In-network benefits

When you go to an eye doctor who accepts this plan, that's called getting your care in network. [Find a VSP eye doctor](#).

You're also covered when you go to an eye doctor who doesn't take this plan, but you'll pay more. That's called getting your care out of network.

Annual allowance

There's a limit on what your plan pays toward the cost of eyeglasses or contacts. It's called an annual allowance. Once you've reached that limit, you're responsible for paying all costs.

Eye exams

Coverage is one exam by a provider each year.

In network

You pay \$15.

Out of network

You pay \$15 plus any costs over \$34.

Lenses and frames

Each calendar year this plan shares the costs for prescription eyeglasses or contact lenses, but not both.

Standard lenses

Standard lenses prescribed by an eye doctor, optometrist or optician are covered once a year.

In network

You pay \$25.

A single copay applies to both lenses and frames.

Out of network

You pay \$25, plus the costs listed below.

A single copay applies to both lenses and frames.

Single vision lenses: You pay costs over \$17.

Bifocal lenses: You pay costs over \$30.

Trifocal lenses: You pay costs over \$43.

Standard frames

Standard frames are covered once every 12 months.

In network

You pay \$25 plus costs over \$150.

A single copay applies to both lenses and frames.

Out of network

You pay \$25 plus costs over \$38.25.

A single copay applies to both lenses and frames.

Contact lenses

Each year, this plan shares the costs for eyeglasses or contact lenses, not both.

Elective contact lenses

Elective contact lenses are covered once a year.

In network

You pay any costs over \$150.

Out of network

You pay any costs over \$100.

Medically necessary contact lenses

Medically necessary contact lenses are covered once a year.

In network

You pay \$25.

Out of network

You pay \$25 plus costs over \$210.



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