

# Blue View Vision<sup>SM</sup> MO.A.20.100.100

Town of Granby

07/01/2020



## What makes us the right choice?

As part of one of the largest health insurance carriers in the United States, Blue View Vision makes it easier to do business.

### Combined administration

When our medical and vision plans are packaged together, you and your employees can enjoy the simplicity of combined administration. That's a real advantage and it's something that strongly differentiates us from stand-alone vision carriers. After all we're not just a vision plan, we're Anthem.



#### Integrated employer capabilities

- One account executive
- One eligibility feed
- Combined underwriting and implementation



#### Integrated employee capabilities

- One ID card
- One customer service phone number
- Combined online capabilities with single sign-on

## What else makes us better?

### Award winning customer service

Benchmark Portal bestows their Center of Excellence Certification, one of the most esteemed recognitions in the customer service arena, only to call centers that rank in the top 10% of those surveyed. Our members can reach the award winning customer care center – staffed by U.S. based representatives – 7 days a week.



### Provider Network

Over **36,000 doctors** at more than **27,000 locations** nationwide, with independent doctors, convenient retail stores and online options that are **all in-network**, makes it easy for employees to take care of their vision needs and they can even do it outside of work hours. Plus, retail or independent, **every** network provider is contracted to extend the same valuable discounts to our members.



LENSCRAFTERS



Online stores:

GLASSES.COM

glasses.com

contactsdirect

contactsdirect.com

1800contacts

1800contacts.com

LENSCRAFTERS

lenscrafters.com



targetoptical.com



ray-ban.com/insurance

Monthly Tier 3 Rates 3 year rate guarantee

☒ Non-Voluntary

☐ Voluntary

Commission

Employee Only:

Accepted on behalf of Group

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Print Name

Signature

Date

[Insert group name]

## Proposed Blue View Vision plan design

Blue View Vision plan benefits	In-network	Out-of-network	Frequency
<b>Eyeglass Frames</b> One pair of eyeglass frames	\$100 allowance, then 20% off any balance	Up to \$45 reimbursement	Once every calendar year
<b>Eyeglass Lenses (<i>instead of contact lenses</i>)</b> One pair of standard plastic prescription lenses: <ul style="list-style-type: none"> <li>Single vision lenses</li> <li>Bifocal lenses</li> <li>Trifocal lenses</li> </ul>	\$20 copay \$20 copay \$20 copay	Up to \$40 reimbursement Up to \$60 reimbursement Up to \$80 reimbursement	Once every calendar year
<b>Eyeglass Lens Enhancements<sup>1</sup></b> <ul style="list-style-type: none"> <li>Transitions Lenses (for a child under age 19)</li> <li>Standard polycarbonate (for a child under age 19)</li> <li>Factory scratch coating</li> </ul>	\$0 copay \$0 copay \$0 copay	No allowance when obtained out-of-network	Same as covered eyeglass lenses
<b>Contact Lenses<sup>2</sup> (<i>instead of eyeglass lenses</i>)</b> <ul style="list-style-type: none"> <li>Elective conventional (non-disposable); OR</li> <li>Elective disposable; OR</li> <li>Non-elective (medically necessary)</li> </ul>	\$100 allowance, then 15% off any balance \$100 allowance ( <i>no additional discount</i> ) Covered in full	Up to \$95 reimbursement Up to \$95 reimbursement Up to \$210 reimbursement	Once every calendar year

<sup>1</sup>When obtaining covered eyewear from a Blue View Vision provider, members may choose to add any of the listed lens enhancements at no extra cost.

<sup>2</sup>Contact lens allowance will only be applied toward the first purchase of contacts made during a benefit period. Any unused amount remaining cannot be used for subsequent purchases in the same benefit period, nor can any unused amount be carried over to the following benefit period.

## Additional savings available from in-network providers

When obtaining covered eyewear from a Blue View Vision provider, members may choose to upgrade their new eyeglass lenses at a discounted cost. Costs shown are after any applicable eyeglass lens copayment.

Description	Member cost	Description	Member cost
<ul style="list-style-type: none"> <li>Progressive Lenses               <ul style="list-style-type: none"> <li>Standard \$55</li> <li>Premium Tier 1 \$85</li> <li>Premium Tier 2 \$95</li> <li>Premium Tier 3 \$110</li> <li>Premium Tier 4 \$175</li> </ul> </li> <li>Anti-Reflective Coating               <ul style="list-style-type: none"> <li>Standard \$45</li> <li>Premium Tier 1 \$57</li> <li>Premium Tier 2 \$68</li> <li>Premium Tier 3 \$85</li> </ul> </li> </ul>		<ul style="list-style-type: none"> <li>Transitions lenses (Adults) \$75</li> <li>Standard Polycarbonate lenses (Adults) \$40</li> <li>UV Coating \$15</li> <li>Tint (Solid and Gradient) \$15</li> <li>Other lens upgrades and add-ons 20% off retail price</li> <li>Additional supplies of conventional contact lenses after benefits have been used 15% off retail price</li> <li>Additional complete pairs of eyeglasses 40% off retail price</li> <li>Eyeglass materials purchased separately 20% off retail price</li> <li>Other items including most non-prescription sunglasses, eyewear accessories such as lens cleaning supplies, contact lens solutions, eyeglass cases, etc. 20% off retail price</li> </ul>	

Other discount offers on LASIK surgery and much more are available through Anthem's Special Offers program.

This information is intended to be a brief outline of plan benefits. The most detailed description of benefits, exclusions, and restrictions can be found in the Certificate of Coverage. Discounts are subject to change without notice. Laws in some states may prohibit network providers from discounting products and services that are not covered benefits under the plan. Discounts will not apply when a manufacturer has imposed a no discount policy on the item.

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