

Vision Benefits from Blue Cross and Blue Shield of Illinois



	\$100 Series		\$130 Series		\$150 Series			\$130 Series	\$150 Series	
Plan...	1	2	3	4	5	6	7	8	9	10
Plan designs	12/12/24/ \$100	12/12/24 \$130	12/12/24 \$130 FF Includes funded fit and follow up for contact lens	12/12/12 \$130	12/12/24 \$150	12/12/12 \$150	12/12/12 \$150 P	12/12/24 \$130	12/12/24 \$150	12/12/12 \$150
Frequency*—once every										
Eye exam	12 months	12 months	12 months	12 months	12 months	12 months	12 months	12 months	12 months	12 months
Frame	24 months	24 months	24 months	12 months	24 months	12 months	12 months	24 months	24 months	12 months
Spectacle lenses or contact lenses	12 months	12 months	12 months	12 months	12 months	12 months	12 months	12 months	12 months	12 months
Contact lens eval/fitting	N/A	N/A	12 months	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Copayments										
Eye exam	\$10	\$10	\$10	\$10	\$10	\$10	\$10	\$10	\$10	\$10
Standard plastic spectacle lenses	\$25	\$10	\$10	\$10	\$10	\$10	\$10	\$25	\$25	\$25
Contact lens fit and follow-up	Up to \$40 for standard; 10% off retail price for premium	Up to \$40 for standard; 10% off retail price for premium	\$0 copay for standard; \$0 copay, 10% off retail price, then apply \$40 allowance for premium	Up to \$40 for standard; 10% off retail price for premium	Up to \$40 for standard; 10% off retail price for premium	Up to \$40 for standard; 10% off retail price for premium	Up to \$40 for standard; 10% off retail price for premium	Up to \$40 for standard; 10% off retail price for premium	Up to \$40 for standard; 10% off retail price for premium	Up to \$40 for standard; 10% off retail price for premium
Frame	\$0 copay/\$100 allowance/20% off balance over \$100	\$0 copay/\$130 allowance/20% off balance over \$130	\$0 copay/\$130 allowance/20% off balance over \$130	\$0 copay/\$130 allowance/20% off balance over \$130	\$0 copay/\$150 allowance/20% off balance over \$150	\$0 copay/\$150 allowance/20% off balance over \$150	\$0 copay/\$150 allowance/20% off balance over \$150	\$0 copay/\$130 allowance/20% off balance over \$130	\$0 copay/\$150 allowance/20% off balance over \$150	\$0 copay/\$150 allowance/20% off balance over \$150
Eyeglass Benefit Standard Plastic Lenses										
Single vision	\$25 copay	\$10 copay	\$10 copay	\$10 copay	\$10 copay	\$10 copay	\$10 copay	\$25 copay	\$25 copay	\$25 copay
Bifocal	\$25 copay	\$10 copay	\$10 copay	\$10 copay	\$10 copay	\$10 copay	\$10 copay	\$25 copay	\$25 copay	\$25 copay
Trifocal	\$25 copay	\$10 copay	\$10 copay	\$10 copay	\$10 copay	\$10 copay	\$10 copay	\$25 copay	\$25 copay	\$25 copay
Lenticular	\$25 copay	\$10 copay	\$10 copay	\$10 copay	\$10 copay	\$10 copay	\$10 copay	\$25 copay	\$25 copay	\$25 copay
Standard progressive	\$90 copay	\$75 copay	\$75 copay	\$75 copay	\$75 copay	\$75 copay	\$10 copay	\$90 copay	\$90 copay	\$90 copay
Premium progressive (tiers 1-3)	\$110/\$120/\$135	\$95/\$105/\$120	\$95/\$105/\$120	\$95/\$105/\$120	\$95/\$105/\$120	\$95/\$105/\$120	\$30/\$40/\$55	\$110/\$120/\$135	\$110/\$120/\$135	\$110/\$120/\$135
Premium progressive (tier 4)	\$90 copay, 80% of charge less \$120 allowance	\$75 copay, 80% of charge less \$120 allowance	\$75 copay, 80% of charge less \$120 allowance	\$75 copay, 80% of charge less \$120 allowance	\$75 copay, 80% of charge less \$120 allowance	\$75 copay, 80% of charge less \$120 allowance	\$10 copay, 80% of charge less \$120 allowance	\$90 copay, 80% of charge less \$120 allowance	\$90 copay, 80% of charge less \$120 allowance	\$90 copay, 80% of charge less \$120 allowance
Tint (solid and gradient)	\$15	\$15	\$15	\$15	\$15	\$15	\$15	\$15	\$15	\$15
Scratch resistant coating	\$15	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Polycarbonate lenses	\$40 kids and adults	\$0 kids and \$40 adults	\$0 kids and \$40 adults	\$0 kids and \$40 adults	\$0 kids and \$40 adults	\$0 kids and \$40 adults	\$0 kids and \$40 adults	\$0 kids and \$40 adults	\$0 kids and \$40 adults	\$0 kids and \$40 adults
Ultraviolet coating	\$15	\$15	\$15	\$15	\$15	\$15	\$15	\$15	\$15	\$15
Anti-reflective coating	\$45/\$57/\$68	\$45/\$57/\$68	\$45/\$57/\$68	\$45/\$57/\$68	\$45/\$57/\$68	\$45/\$57/\$68	\$45/\$57/\$68	\$45/\$57/\$68	\$45/\$57/\$68	\$45/\$57/\$68
High index lenses	20% off retail	20% off retail	20% off retail	20% off retail	20% off retail	20% off retail	20% off retail	20% off retail	20% off retail	20% off retail
Polarized lenses	20% off retail	20% off retail	20% off retail	20% off retail	20% off retail	20% off retail	20% off retail	20% off retail	20% off retail	20% off retail
Photocromatic/transitions plastic	\$75	\$75	\$75	\$75	\$75	\$75	\$75	\$75	\$75	\$75
Contact Lenses (in lieu of spectacle lenses)										
Conventional	\$0 copay/\$100 allowance/ 15% off balance over allowance	\$0 copay/\$130 allowance/ 15% off balance over allowance	\$0 copay/\$130 allowance/ 15% off balance over allowance	\$0 copay/ \$130 allowance/ 15% off balance over allowance	\$0 copay/\$150 allowance/ 15% off balance over allowance	\$0 copay/\$150 allowance/ 15% off balance over allowance	\$0 copay/\$150 allowance/ 15% off balance over allowance	\$0 copay/\$130 allowance/ 15% off balance over allowance	\$0 copay/\$150 allowance/ 15% off balance over allowance	\$0 copay/\$150 allowance/ 15% off balance over allowance
Disposable	\$0 copay/\$100 allowance/ plus balance over \$100	\$0 copay/\$130 allowance/ plus balance over \$130	\$0 copay/\$130 allowance/ plus balance over \$130	\$0 copay/\$130 allowance/ plus balance over \$130	\$0 copay/\$150 allowance/ plus balance over \$150	\$0 copay/\$150 allowance/ plus balance over \$150	\$0 copay/\$150 allowance/ plus balance over \$150	\$0 copay/\$130 allowance/ plus balance over \$130	\$0 copay/\$150 allowance/ plus balance over \$150	\$0 copay/\$150 allowance/ plus balance over \$150
Medically necessary	\$0 copay; paid-in-full	\$0 copay; paid-in-full	\$0 copay; paid-in-full	\$0 copay; paid-in-full	\$0 copay; paid-in-full	\$0 copay; paid-in-full	\$0 copay; paid-in-full	\$0 copay; paid-in-full	\$0 copay; paid-in-full	\$0 copay; paid-in-full

\*All plan designs shown are in-network. Out-of-network benefits are available on all plans.