

# CareFirst Vision Plans and Benefit Information

## Member Benefits Comparison Chart

Benefit	BlueVision Plus					
	Option 1	Option 2	Option 3	Option 4	NEW Option 5	NEW Option 6
Frequency (Exam/Lenses/Frames)	12/12/12	24/24/24	12/12/12	24/24/24	12/12/24	12/12/24
Exam Copay	\$0 copay	\$0 copay	\$10 copay	\$10 copay	\$0 copay	\$10 copay
Spectacle Lens Copay	\$0 copay	\$0 copay	\$0 copay	\$0 copay	\$0 copay	
Frame Allowance	<b>Collection Frames<sup>1</sup>:</b> No copay for over 200 frames <b>Non-Collection Frames:</b> Plan pays up to \$100, Member pays balance minus 20% discount <sup>2,3</sup>				<b>Collection Frames<sup>1</sup>:</b> No copay for over 200 frames <b>Non-Collection Frames:</b> Plan pays up to \$100, Member pays balance minus 20% discount <sup>2,3</sup>	
Contact Allowance	<b>Collection Lenses<sup>1</sup>:</b> No copay with evaluation if Collection Lenses are dispensed, <b>Medically Necessary:</b> No copay with prior approval <b>Non-Collection Contact Lenses:</b> Plan pays up to \$127, Member pays balance minus a 15% discount <sup>2,3</sup>				<b>Collection Lenses<sup>1</sup>:</b> No copay with evaluation if Collection Lenses are dispensed, <b>Medically Necessary:</b> No copay with prior approval <b>Non-Collection Contact Lenses:</b> Plan pays up to \$127, Member pays balance minus 15% discount <sup>2,3</sup>	
Contact Lens Eval & Fit	Covered—Collection <sup>1</sup> and Medically Necessary contact lenses Not Covered—When Non-Collection lenses are dispensed				Covered—Collection <sup>1</sup> and Medically Necessary contact lenses Not Covered—When Non-Collection lenses are dispensed	
Funding	Employer-sponsored or Voluntary				Employer-sponsored or Voluntary	

Network	Value Add and Discounts <sup>2,3</sup> (fixed fee)
More than 131,000 access points across the U.S. accept BlueVision Plus. This includes private practices, retailers, and online retailers such as Visionworks, Walmart, Costco and Warby Parker, Glasses.com.  To find a vision provider, go to <a href="https://carefirst.com/findadoc">carefirst.com/findadoc</a> , log in to My Account, select the <i>BlueVision Plus Network</i> , then <i>Browse by Category, Vision</i> , to search for a provider or vision center.	<b>Fixed Fee LENS OPTIONS (add to spectacle prices above)</b>
	Retinal Imaging—Member Fixed Fee
	1-year repair and breakage warranty on all Collection frames and lenses.
	Laser Vision Correction To be eligible for Davis Vision contracted prices for LASIK, members must contact QualSight, the LASIK network administrator at 855-502-2020 prior to scheduling exam.
	Hearing Aid Discounts Davis Vision Members: 888-809-0044. Call 8 a.m.–8 p.m. EST, Monday–Friday.

<sup>1</sup> Collection is available at most participating independent provider offices. Collection is subject to change.

<sup>2</sup> These discounts are not considered covered benefits under the Plan. This portion of the Plan is not an insurance product. Additional plan discounts may not be available at all provider locations in all states. Please confirm that discounts are accepted when making your appointment. Discounts are not insurance and subject to change without notice.

<sup>3</sup> Available additional discounts not applicable at Glasses.com, 1-800 Contacts, Walmart locations, Sam's Club locations, or Costco locations or where limited by law or manufacturer restrictions.

## Member Benefits Comparison Chart

Benefit	BlueVision Plus															
	Option A	Option B	Option C	Option D	NEW Option E	NEW Option F	NEW Option G	NEW Option H	NEW Option I	NEW Option J	NEW Option K	NEW Option L	NEW Option M	NEW Option N	NEW Option O	NEW Option P
Frequency (Exam/Lenses/Frames)	12/12/24	12/12/24	12/12/12	12/12/12	12/12/24	12/12/24	12/12/12	12/12/12	12/12/24	12/12/24	12/12/12	12/12/12	12/12/24	12/12/24	12/12/12	12/12/12
Exam Copay	\$0 copay	\$10 copay	\$0 copay	\$10 copay	\$0 copay	\$10 copay	\$0 copay	\$10 copay	\$0 copay	\$10 copay	\$0 copay	\$10 copay	\$0 copay	\$10 copay	\$0 copay	\$10 copay
Spectacle Lens Copay	\$20 copay				\$20 copay				\$20 copay				\$20 copay			
Frame Allowance	<b>Collection Frames<sup>1</sup>:</b> No copay for over 200 frames <b>Non-Collection Frames:</b> Plan pays up to \$130, member pays balance minus 20% discount <sup>2,3</sup>				<b>Collection Frames<sup>1</sup>:</b> No copay for over 200 frames <b>Non-Collection Frames:</b> Plan pays up to \$150, member pays balance minus 20% discount <sup>2,3</sup>				<b>Collection Frames<sup>1</sup>:</b> No copay for over 200 frames <b>Non-Collection Frames:</b> Plan pays up to \$180, member pays balance minus 20% discount <sup>2,3</sup>				<b>Collection Frames<sup>1</sup>:</b> No copay for over 200 frames <b>Non-Collection Frames:</b> Plan pays up to \$200, member pays balance minus 20% discount <sup>2,3</sup>			
Contact Allowance	<b>Collection<sup>1</sup>/Medically Necessary (with prior approval):</b> No copay <b>Non-Collection:</b> Plan pays up to \$130, member pays balance minus 15% discount <sup>2,3</sup>				<b>Collection<sup>1</sup>/Medically Necessary (with prior approval):</b> No copay <b>Non-Collection:</b> Plan pays up to \$150, member pays balance minus 15% discount <sup>2,3</sup>				<b>Collection<sup>1</sup>/Medically Necessary (with prior approval):</b> No copay <b>Non-Collection:</b> Plan pays up to \$180, member pays balance minus 15% discount <sup>2,3</sup>				<b>Collection<sup>1</sup>/Medically Necessary (with prior approval):</b> No copay <b>Non-Collection:</b> Plan pays up to \$200, member pays balance minus 15% discount <sup>2,3</sup>			
Contact Lens Eval & Fit	Plan pays up to \$60 (specialty) Member pays \$20 copay minus a 15% discount <sup>2,3</sup>				Plan pays up to \$60 (specialty) Member pays \$20 copay minus a 15% discount <sup>2,3</sup>				Plan pays up to \$60 (specialty) Member pays \$20 copay minus a 15% discount <sup>2,3</sup>				Plan pays up to \$60 (specialty) Member pays \$20 copay minus a 15% discount <sup>2,3</sup>			
Funding	Employer-sponsored or Voluntary				Employer-sponsored or Voluntary											

Network	Value Add and Discounts <sup>2,3</sup> (fixed fee)
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Provider network managed by Davis Vision, an independent company that provides administrative services for vision care to CareFirst BlueCross BlueShield and Care First BlueChoice, Inc. members and offers an extensive national network of optometrists, ophthalmologists, and opticians. Davis Vision is solely responsible for the services it provides.

CareFirst BlueCross BlueShield is the shared business name of CareFirst of Maryland, Inc. and Group Hospitalization and Medical Services, Inc. CareFirst of Maryland, Inc., Group Hospitalization and Medical Services, Inc., CareFirst BlueChoice, Inc., and The Dental Network, Inc. are independent licensees of the Blue Cross and Blue Shield Association. BLUE CROSS®, BLUE SHIELD® and the Cross and Shield Symbols are registered service marks of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield Plans.