Routine Vision (basic plan)

COVA HDHP

Administered by Anthem Blue Cross and Blue Shield

ROUTINE VISION BENEFITS from Blue View Vision[™]

Blue View Vision network services

Your routine vision benefit uses the Blue View Vision network – one of the largest vision care networks in the industry with a wide selection of ophthalmologists, optometrists and opticians. The network also includes convenient retail locations, many with evening and weekend hours, including 1-800 CONTACTS, LensCrafters[®], and Target Optical[®]. You may also use your in-network benefits to order eyewear online at <u>Glasses.com</u> and <u>ContactsDirect.com</u>.

Go to **www.anthem.com/cova** to find a Blue View Vision provider near you.

Out-of-network services

You can choose to receive care outside of the Blue View Vision network. You simply get an allowance toward services and you pay the rest. Just pay in full at the time of service and then file a claim for reimbursement. In-network benefits and discounts will not apply.

YOUR BLUE VIEW VISION PLAN AT-A-GLANCE		IN-NETWORK	OUT-OF-NETWORK
Routine eye exam (once per plan year)		\$15 copay	\$30 allowance
Eyeglass frames*			
Once per plan year you may select any eyeglass frame ¹ and receive the following discount toward the purchase price:		35% off retail price	N/A
Standard Eyeglass Lenses			
Once per plan year you may receive any one of the foll	owing lenses:		
 Standard plastic single vision lenses (1 pa Standard plastic bifocal lenses (1 pa Standard plastic trifocal lenses (1 pa) 	ir)	\$50 copay; then covered in full \$70 copay; then covered in full \$105 copay; then covered in full	N/A
Upgrade Eyeglass Lenses (available for additional cost)	Lens Options	Member cost for upgrades	
When purchasing a complete pair of eyeglasses ¹	UV Coating	\$15	
(frame and lenses), you may choose to upgrade your	• Tint (Solid and Gradient)	\$15	N/A
new eyeglass lenses at a discounted cost.	Standard Scratch-	\$15 \$40	IN/A
Member costs shown are in addition to the member cost of the standard plastic eyeglasses lenses.	ResistanceStandard Polycarbonate	\$40	
	Standard Progressive	\$65	
	 Standard Anti-Reflective 	\$45	
	Coating	000/ 56 / 11 /	
	Other Add-ons and Services	20% off retail price	
	(i.e. high index lenses, anti- fog coating)		
Conventional Contact Lenses (non-disposable type)	Other Add-ons and Services (i.e. high index lenses, anti-	20% off retail price	
		450/ 55 1 1	N1/A

Discount applies to materials only 15% off retail price N/A

ROUTINE VISION CARE SERVICES (continued)

Contact lens fitting and follow-up A contact lens fitting, and up two follow-up visits are

available to you once a comprehensive eye exam has been completed.

IN-NETWORK You pay up to \$55

10% off retail price

OUT-OF-NETWORK Discounts not available out-of-network *A standard contact lens fitting includes spherical clear contact lenses for conventional wear and planned replacement. Examples include but arenot limited to disposable and frequent replacement lenses.

**A premium contact lens fitting includes all lens designs, materials and specialty fittings other than standard contact lenses. Examples include but are not limited to toric and multifocal lenses.

Premium contact lens fitting**

Standard contact fitting*

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"When purchased as part of a complete pair of eyeglasses. If frames, lenses or lens options are purchased separately, members will receive a 20% discount instead. Discount is not available on certain frame brands in which the manufacturer imposes a no discount policy.

QUESTIONS? Contact Anthem member services at 1-800-552-2682.



This is a summary of your benefits under the Vision and Hearing optional buy-up. For a complete description of benefits, exclusions and limitations, please see your COVA HDHP Member Handbook. Thein-network providers referred to in this communication are independently contracted providers who exercise independent professional judgment. They are not agents or employees of Anthem.

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A10680 (4/2023) COVA HDHP Blue View Vision