



MASSACHUSETTS

BLUE 20/20

BENEFITS YOU CAN SEE— FROM A COMPANY YOU TRUST

Our Blue 20/20 vision plans provide you with savings on eyeglasses, contacts, and routine eye exams.

Blue 20/20 vision coverage brings you more choice, more value, and more flexibility, including:

- Access to one of the nation’s largest vision networks
- Enhanced vision coverage for kids under 19 who are enrolled in select Blue 20/20 plans¹
- Exclusive savings on designer frames, premium lenses and coatings, and contact lenses
- 24/7 access to online resources, including your digital ID card, benefit details, cost estimator tool, provider locator, and more



Enhanced vision coverage for enrolled kids under 19:

- Two fully covered eye exams at \$0 copay per benefit period
- One pair of replacement lenses (subject to prescription change) per benefit period
- Fully covered blue-light lenses² treatment
- Fully covered standard polycarbonate lenses
- 25% off non-prescription blue-light glasses (new discount for enrolled kids under 19)

Additional features and discounts:

- Laser vision correction — 15% off the retail price or 5% off the promotional price for LASIK or PRK procedures
- 40% off a complete second pair of glasses
- 20% off non-prescription sunglasses

You can even save on hearing exams and hearing aids through Amplifon Hearing, an independent company.

To get started, call 1-866-921-5367 or learn more at amplifonusa.com/blue2020.

Find a provider when and where you want.

With so many locations to choose from, you’re sure to find a provider with a schedule that works for you.

Online shopping made easy.

For added convenience, shop online for glasses at glasses.com, Oakley.com, Targetoptical.com, Lenscrafters.com, and Ray-Ban.com, or shop for contacts at contactsdirect.com.

Choose from thousands of independent providers and retailers, including:

LENSCRAFTERS®

PEARLE EST. 1961 OOVISIONSM

OPTICAL®

Blue 20/20 is administered by EyeMed Vision Care®, an independent vision benefits company.

1. Applicable plans include Exam Plus vision plans. Does not apply to Materials Only and Exam Only vision plans. To confirm your coverage, check your benefit details.

2. This applies to prescription lenses only.

KEEP AN EYE ON YOUR HEALTH

Routine eye exams do more than identify vision problems; they can also provide the earliest detection of serious health conditions, such as high blood pressure or diabetes.³

IT'S EASY TO GET STARTED



1. Enroll through your employer if you haven't already.



2. Access your vision benefits through MyBlue at bluecrossma.org or download the MyBlue app⁴ or visit www.Blue2020ma.com.



3. Make an appointment and take advantage of special offers.

LOOK INTO SAVINGS WITH BLUE 20/20

Save \$349 on glasses with standard single-vision lenses.

	With Blue 20/20 ⁵	Without ⁶
Step 1: Get an eye exam	\$10	\$131
Step 2: Pick a frame Example: Member selected \$170 frame and has a \$130 allowance	\$40	\$170
Step 3: Pick lenses Upgrade to std. polycarbonate	\$25 \$40	\$75 \$70
Add tint	\$15	\$33
Total cost	\$130	\$479

Save \$286 on disposable contact lenses.

	With Blue 20/20 ⁵	Without ⁶
Step 1: Get an eye exam fitting and follow-up	\$10 \$40	\$131 \$75
Step 2: Purchase contact lenses Example: Member selected \$200 contact lenses and has a \$130 allowance	\$70	\$200
Total cost	\$120	\$406

73%
SAVINGS

70%
SAVINGS

3. Centers for Disease Control and Prevention. "Keep an Eye on Your Vision Health," October 2020. Available at cdc.gov/visionhealth/resources/features/keep-eye-on-vision-health.html.

4. If you only have vision coverage from us, you must continue to use blue2020ma.com to view your benefits.

5. The examples above are based on a Blue 20/20 plan with a \$10 exam copay/\$25 lens copay/\$130 frame or contact allowance.

6. Costs are based on industry averages. Retail prices and costs will vary by market and provider type. Premiums not included.

Benefits aren't provided for services or materials arising from: orthoptic or vision training, subnormal vision aids, and any associated supplemental testing; aniseikonic lenses; medical and/or surgical treatment of the eye, eyes, or supporting structures; any eye or vision examination, or any corrective eyewear required by a policyholder as a condition of employment; safety eyewear; services provided as a result of any workers' compensation law, or similar legislation, or required by any governmental agency or program whether federal, state, or subdivisions thereof; plano (non-prescription) lenses and/or contact lenses; non-prescription sunglasses; two pair of glasses in lieu of bifocals; services or materials provided by any other group benefit plan providing vision care; certain brand-name vision materials in which the manufacturer imposes a no-discount policy; or services rendered after the date an insured person ceases to be covered under the policy, except when vision materials ordered before coverage ended are delivered, and the services rendered to the insured person are within 31 days from the date of such order. Lost or broken lenses, frames, glasses, or contact lenses won't be replaced except in the next benefit frequency when vision materials would next become available. Benefits may not be combined with any discount, promotional offering, or other group benefit plans. Standard/premium progressive lens not covered — these are funded as a bifocal lens. Standard progressive lens covered — these are funded premium progressive as a standard.

Blue Cross Blue Shield of Massachusetts complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation, or gender identity.

ATTENTION: If you don't speak English, language assistance services, free of charge, are available to you. Call Member Service at the number on your ID card (TTY: 711).

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia con el idioma. Llame al número de Servicio al Cliente que figura en su tarjeta de identificación (TTY: 711).

ATENÇÃO: Se fala português, são-lhe disponibilizados gratuitamente serviços de assistência de idiomas. Telefone para os Serviços aos Membros, através do número no seu cartão ID (TTY: 711).