

**MEA Benefits Trust Blue View Vision Plan  
Frequently Asked Questions  
For Members Enrolled on MEA Choice Plus or the MEA Standard Plans**

**Q: When will my Blue View Vision Plan go into effect?**

A: If you are enrolled through the MEA Benefits Trust on the MEA Choice Plus Plan, or any of the MEA Standard Plans you and your covered dependents will also be enrolled on the Blue View Vision Plan. You do not have to enroll separately for the vision plan.

**Q: Will I have a separate Blue View Vision ID card?**

A: No, you will receive a new ID card from Anthem and that card will be for both your medical and vision coverage. The Blue View Vision logo will be located in the lower left corner of your ID card.

**Q: Is the vision coverage part of my medical plan?**

A: No, the Blue View Vision coverage is a separate plan from the medical plan, therefore any copayments you pay under the vision plan will not count toward the copayment limits under your medical plan.

**Q: Do I need to use a Blue View Vision network provider?**

A: You will receive the highest level of benefits when you receive services from a Blue View Vision network provider. However, if your eye doctor is not within the Blue View Vision network, you can still receive services from them and receive allowances toward those services. Please review your Blue View Vision Benefit Overview for specific information on in-network and out-of-network benefits. You can find the Blue View Vision Benefit Overview on the Anthem's website at [www.anthem.com/meabt](http://www.anthem.com/meabt) or the MEABT's website at [www.meabt.org](http://www.meabt.org).

**Q: How do I find a Blue View Vision network provider?**

A: We have included Blue View Vision network directories on the MEABT's website at [www.meabt.org](http://www.meabt.org) or you can access these directories at [www.anthem.com/meabt](http://www.anthem.com/meabt). You can also go to [www.anthem.com](http://www.anthem.com), under *Useful Tools* on the right, select **Find a Doctor**. Next, select a type of provider, place or name, then Select **Search**. If you are searching for an eye doctor before your Blue View Vision benefits begin – select **Search as a Guest** option.

**Q: I have another vision plan currently, do I need to keep that plan and if I do, which plan would be primary?**

A: Whether to keep two vision plans is an individual decision. The vision plan through the MEABT does not cost you anything, so if you are paying a premium for your other vision plan, you should compare the benefits to see if it is worth it for you to have two vision plans. If you decide to keep your other vision plan, in all instances, the MEABT Blue View Vision plan will be considered to be the primary vision plan.

**Q: I have two vision plans; can I use both plans together in order to increase the allowance I receive for eyeglass frames or contact lenses?**

**A:** Two vision plans cannot be coordinated for purposes of increasing the overall allowance for a service. As a result, there is no coordination of benefits between vision plans. If a member has two vision plans, they would have to choose which plan to use for a particular service. For example, a member with two vision plans could choose to use one plan to purchase eye glasses and then use their other vision plan to purchase a pair of contact lenses. Depending upon the capabilities of the vision provider, the provider will need to file each claim separately to each vision ID number for the particular service the member is seeking benefits for. The member would need to work closely with their vision provider to ensure the claim is filed to each plan separately as intended by the member in order to maximize their benefits.

For this reason, having two vision plans may be confusing to members. A member should carefully consider the premiums they pay under the voluntary vision plan compared to the benefit of having two plans in place knowing that the allowances for any service cannot be coordinated between the two plans. As a result, it is purely an individual decision whether to continue with two.

**Q: How often can I see my eye doctor for a routine eye exam?**

**A:** Routine eye exams for vision correction are covered under your Blue View Vision plan every 12 months. If you receive services from an in-network provider, the cost of the routine eye exam is covered in full under your Blue View Vision plan. If you see an out-of-network provider you will receive an \$80 allowance toward the cost of your eye exam.

**Q: What if I have a medical condition with my eyes, is that covered under my Blue View Vision plan?**

**A:** Medical conditions associated with the eye will continue to be covered under your medical plan. The Blue View Vision plan is for routine eye exams.

**Q: Does the Blue View Vision plan cover eyeglasses?**

**A:** Yes, benefits are available for eyeglass frames and lenses every 24 months. Please see your Blue View Vision Benefit Overview for information on your in and out-of-network benefits.

**Q: Does the Blue View Vision plan cover contact lenses?**

**A:** Yes, if you prefer contact lenses to glasses, you may choose contact lenses instead of eyeglass lenses and receive an allowance toward the cost of a supply of contact lenses.

**Q: Can you use the Blue View Vision plan for both eyeglass lenses and contact lenses in the same year?**

**A:** No, you must choose to use your Blue View Vision benefit for either eyeglass lenses or contact lenses. For example, if you decide to use your benefit in October of 2018 to purchase contact lenses, then you would be eligible for the benefit again in October of 2020. At that time you could choose to use your benefits toward either contact lenses or eyeglass lenses.

**Q: If I'm purchasing contact lenses, do I have to use my entire allowance of \$150 for my initial contact lens order or can I use the allowance to purchase contacts throughout the year?**

**A:** Your contact lens allowance can only be applied toward the first purchase of contacts you make during a benefit period. Any unused amount remaining cannot be used for subsequent purchase

made during the same benefit period, nor can any unused amount be carried over to the following benefit period.

**Q: If I have specific questions about how my Blue View Vision plan works, who do I call?**

A: Please call the telephone number on the back of your ID card with any questions.

**Q: Should I adjust my FSA for next year, as I currently use this to purchase eyewear?**

A: Yes, if you use your FSA to purchase eyewear you should consider the benefits available under the Blue View Vision plan when re-calculating your FSA needs.

**Q: If my provider is not currently in-network, how would she become an in-network provider?**

A: If your vision care provider would like to join the Blue View Vision network, they can go to [www.eyemedinfoocus.com/join](http://www.eyemedinfoocus.com/join) to receive information on how to join the network.