



Maximize Your Contacts Benefit

Benefit overview

With your vision benefit, you're eligible for either contacts or spectacle lenses within the defined benefit frequency. If you use your benefit for contacts, you're still eligible to use your frame benefit, too.

Sample vision plan	<p>\$130 frame allowance</p> <p>\$10 lens copay</p> <p>\$130 contact allowance</p>	Additional discounts
Sample member transaction	<ul style="list-style-type: none">You buy contacts (apply \$130 contacts allowance)You buy a pair of glasses (apply \$130 frame allowance and 20% off any amount over, plus receive 20% off spectacle lenses)	<ul style="list-style-type: none">40% off unlimited complete pairs of prescription eyewear (once benefit has been used)20% off partial eyewear purchases and non-covered items15% off conventional contacts



For illustrative purposes only. May not be available in all jurisdictions. Coverage may be subject to limitations, exclusions and other coverage conditions contained in the issued policy. Please consult the policy for the actual terms of coverage.

For employee use. Benefits are available from the EyeMed Vision Care, LLC provider network and are administered by First American Administrators, Inc., independent companies that offer benefits on behalf of Blue Cross and Blue Shield of Illinois. Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company, an Independent Licensee of the Blue Cross and Blue Shield Association. Insurance products issued by Dearborn Life Insurance Company, 701 E. 22nd St. Suite 300, Lombard, IL 60148. Blue Cross and Blue Shield of Illinois is the trade name of Dearborn Life Insurance Company, an independent licensee of 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.