

Changes to your vision plan

Effective January 1, 2026, there will be some changes to your plan's costs and benefits. We are notifying you in advance so you can make informed decisions about your health coverage. Please visit blueshieldca.com/policies for updated terms and conditions of coverage.

Dental and vision administrative/language clarifications

These are revisions made to your *Evidence of Coverage (EOC)* or *Summary of Benefits (SOB)* to help make your coverage easier to understand, but do not impact your coverage or how your benefits/services work.

Section name	Description of the change(s)
Vision coverage: Payment of benefits	<p>This section of the EOC was revised to clarify the time and payment of claims. The below language was added:</p> <p>The contracted VPA will process your claim within 30 calendar days of receipt if it is not missing any required information. If your claim is missing any required information, you or your provider will be notified and asked to submit the missing information. The contracted VPA cannot process your claim until we receive the missing information. Once the missing information is received, the contracted VPA will have 30 calendar days to process your claim.</p>
Vision coverage: Definitions	<p>This section in the EOC has a revision under dependent definition to clarify the child dependent age. Please review your vision EOC for the full benefit description.</p>

Please note: This document is not a contract. For complete benefit descriptions, terms and conditions, exclusions, and limitations of the health plan, please read your EOC.