



**COMMONWEALTH OF MASSACHUSETTS**  
**Office of Consumer Affairs and Business Regulation**  
**DIVISION OF INSURANCE**

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COMMISSIONER OF INSURANCE

**INDIVIDUAL VISION EXPENSE INSURANCE POLICIES  
 THAT MEET THE REQUIREMENTS OF  
 MASSACHUSETTS' REGULATION 211 CMR 42.00**

<u>Company Name</u>	<u>Approval Date</u>
<p><b>1. AMERICAN FAMILY LIFE ASSURANCE COMPANY OF COLUMBUS</b>            1932 Wynnton Road            Columbus, GA 31999-0001            (800) 992-3522</p> <p><i>Policy #s:</i>            VSN100MA <sup>1</sup> (vision insurance policy)</p>	08/06
<p><b>2. THE CHESAPEAKE LIFE INSURANCE COMPANY <sup>2</sup></b>            9151 Grapevine Highway            North Richland Hills, TX 76180            (800) 733-1110</p> <p><i>Policy #s:</i>            CH-26023-IP (5/07) MA (vision insurance policy)</p>	06/11
<p><b>3. MASSACHUSETTS VISION SERVICE PLAN</b>            3333 Quality Drive            Rancho Cordova, CA 95670            (800) 877-7195</p> <p><i>Policy #s:</i>            VSP IND MA 0315 <sup>3</sup> (vision insurance policy)</p>	09/15

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<sup>1</sup> Product is a guaranteed renewable vision insurance policy sold on a voluntary basis and is only offered through a worksite venue on a payroll deduction basis.  
<sup>2</sup> Product is a conditionally renewable vision insured preferred provider plan. Please call the carrier directly if you have any questions about whether the plan is specifically available in your area and whether your eye care provider participates in the carrier's vision care network.  
<sup>3</sup> Plan is a Closed Network Plan or so-called Exclusive Provider Plan ("EPO"). Services are only available from a VSP Preferred Provider.