



**Choice Series With Lens Options
Vision Plan Offered through VSP**

	Plan A	Plan B	Plan C
Examination	12 Months	12 Months	12 Months
Lenses	24 Months	12 Months	12 Months
Frame	24 Months	24 Months	12 Months

	Plan A	Plan B	Plan C
	\$20/\$20 Copay	\$20/\$20 Copay	\$20/\$20 Copay
Employee	\$ 11.72	\$ 12.58	\$ 16.01
Employee + One	\$ 16.85	\$ 18.07	\$ 22.94
Family	\$ 30.63	\$ 32.82	\$ 33.59

**Plans can be Billed on a Monthly, Quarterly, or Semi-Annual Basis
EFT Payment Options are also Available**