



Signature Series Vision Plan Offered through VSP

	Plan A	Plan B	Plan C	Exam Plus
Examination	12 Months	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	Exam Plus
	\$20/\$20 Copay	\$20/\$20 Copay	\$20/\$20 Copay	\$20 Copay/Discount
Employee	\$ 14.30	\$ 15.36	\$ 19.52	\$ 2.89
Employee + One	\$ 20.55	\$ 22.03	\$ 27.93	\$ 3.87
Family	\$ 37.31	\$ 40.01	\$ 50.69	\$ 5.10

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