

Washburn University

Group Vision Insurance Monthly Premiums
Full-Time Employee (30+ hours per week) & Half-Time Employee (20 - 29 hours per week)

1/1/2020

PLAN	EyeMed Vision			
	Single	Employee + Child/ren	Employee + Spouse	Family

Vision Insurance - All Tiers

Employee Total	\$ 6.72	\$ 13.44	\$ 12.77	\$ 19.76
Washburn Total	\$ -	\$ -	\$ -	\$ -
Total Premium	\$ 6.72	\$ 13.44	\$ 12.77	\$ 19.76