



2025 Monthly Vision Premiums

	BASIC PLAN	EXPANDED PLAN
ACTIVE MEMBERS		
Employee Only	\$3.18	\$6.30
Employee + Child(ren)	\$6.35	\$12.60
Employee + Spouse	\$6.03	\$11.98
Employee + Spouse + Child(ren)	\$9.33	\$18.54
COBRA PARTICIPANTS		
Employee Only/Single	\$3.24	\$6.43
Employee + Child(ren)	\$6.48	\$12.85
Employee + Spouse	\$6.15	\$12.22
Employee + Spouse + Child(ren)	\$9.52	\$18.91
COBRA DISABILITY PARTICIPANTS		
Employee Only/Single	\$4.77	\$9.45
Employee + Child(ren)	\$9.53	\$18.90
Employee + Spouse	\$9.05	\$17.97
Employee + Spouse + Child(ren)	\$14.00	\$27.81
RETIREE PARTICIPANTS		
Retiree Only	\$3.18	\$6.30
Retiree + Child(ren)	\$6.35	\$12.60
Retiree + Spouse	\$6.03	\$11.98
Retiree + Spouse + Child(ren)	\$9.33	\$18.54
Spouse Only	\$3.18	\$6.30
One Child Only	\$3.18	\$6.30
Two or More Children Only	\$6.35	\$12.60
Spouse + Children Only	\$6.35	\$12.60