

# Voluntary Vision Insurance Premiums

2026 PLAN YEAR



Voluntary Vision Provided by BlueView Vision

<b>TOTAL COST</b>			
Coverage Level - Low	Total Premium	Employee Cost	Employer Cost
Employee Only	7.12	7.12	0.00
Employee + Spouse	11.83	11.83	0.00
Employee + Children	11.34	11.34	0.00
Family	18.10	18.10	0.00

## EMPLOYEES PAID MONTHLY – 12 PAY PERIODS

*Payroll deductions are taken over 12 pay periods*

Coverage Tier	Voluntary Vision Insurance
Coverage Level	Employee Cost
Employee Only	7.12
Employee + Spouse	11.83
Employee + Children	11.34
Family	18.10

## EMPLOYEES PAID BIWEEKLY – 26 PAY PERIODS

*Payroll deductions are taken over 26 pay periods*

Coverage Tier	Voluntary Vision Insurance
Coverage Level	Employee Cost
Employee Only	3.29
Employee + Spouse	5.46
Employee + Children	5.23
Family	8.35

## EMPLOYEES PAID BIWEEKLY – 20 PAY PERIODS

*Payroll deductions are taken over 20 pay periods*

Coverage Tier	Voluntary Vision Insurance
Coverage Level	Employee Cost
Employee Only	4.27
Employee + Spouse	7.10
Employee + Children	6.80
Family	10.86