

Washburn University

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

1/1/2021

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