

# TRI-COUNTY SCHOOLS INSURANCE GROUP

## Vision Plan Rates (Monthly)

Effective: July 1, 2010

<b>PLAN A (12/24/24)</b>	<b>\$0 Copay</b>	<b>\$5 Copay</b>	<b>\$10 Copay</b>	<b>\$15 Copay</b>
<b>COMPOSITE:</b>	\$18	\$17	\$16	\$15
<b>TIERED:</b>				
Employee Only	\$11	\$10	\$9	\$8
Employee + One Dependent	\$16	\$15	\$14	\$13
Employee + Family	\$29	\$28	\$27	\$26

<b>PLAN B (12/12/24)</b>	<b>\$0 Copay</b>	<b>\$5 Copay</b>	<b>\$10 Copay</b>	<b>\$15 Copay</b>
<b>COMPOSITE:</b>	\$21	\$20	\$19	\$18
<b>TIERED:</b>				
Employee Only	\$13	\$12	\$11	\$10
Employee + One Dependent	\$19	\$18	\$17	\$16
Employee + Family	\$33	\$32	\$31	\$30

<b>PLAN C (12/12/12)</b>	<b>\$0 Copay</b>	<b>\$5 Copay</b>	<b>\$10 Copay</b>	<b>\$15 Copay</b>
<b>COMPOSITE:</b>	\$27	\$26	\$25	\$24
<b>TIERED:</b>				
Employee Only	\$17	\$16	\$15	\$14
Employee + One Dependent	\$24	\$23	\$22	\$21
Employee + Family	\$43	\$42	\$41	\$40