

Medical Coverage

Monthly Premiums HK-POS (Plan 1) – Employee Deduction for Insurance

	Employee Bi-wkly Deduction	Rivanna Monthly Contribution	Total Monthly Premium
Employee Only	\$17.50	\$658.87	\$693.87
Employee & Child	\$55.50	\$836.33	\$947.33
Employee & Children	\$163.50	\$1,083.65	\$1,410.65
Employee & Spouse	\$186.50	\$1,181.28	\$1,554.28
Employee & Family	\$227.00	\$1,686.60	\$2,140.60

Monthly Premiums HSA - HDHP (Plan 2) – Employee Deduction for Insurance

	Employee Bi-wkly Deduction	Rivanna Monthly Contribution	Total Premium
Employee Only	\$2.50	\$658.54	\$663.54
Employee & Child	\$35.00	\$836.41	\$906.41
Employee & Children	\$132.50	\$1,083.99	\$1,348.99
Employee & Spouse	\$152.50	\$1,181.34	\$1,486.34
Employee & Family	\$180.00	\$1,687.04	\$2,047.04

Dental Coverage

Monthly Premiums Anthem Dental – Employee Deduction for Insurance

	Employee Bi-wkly Deduction	Rivanna Monthly Contribution	Total Premium
Employee Only	\$3.50	\$22.22	\$29.22
Employee & Child(ren)	\$5.00	\$60.42	\$70.42
Employee & Spouse	\$5.00	\$51.58	\$61.58
Employee & Family	\$7.50	\$95.74	\$110.74