PRINCE WILLIAM COUNTY

FYE2022 HEALTH CARE COSTS - Full Time Employees

Effective: July 1, 2021

	TOTAL PREMIUM	County Pays Monthly	County Pays Bi-Weekly	EMPLOYEE PAYS MONTHLY	EMPLOYEE PAYS BI-WEEKLY
Anthem Healthkeepers POS					**APS**
Employee only	$ 585.88	$ 558.36	$ 279.18	$ 27.52	$ 13.76
Employee + child(ren)	$ 1,037.08	$ 779.00	$ 389.50	$ 258.08	$ 129.04
Employee + spouse	$ 1,209.30	$ 911.54	$ 455.77	$ 297.76	$ 148.88
Employee + family	$ 1,730.18	$ 1,301.82	$ 650.91	$ 428.36	$ 214.18
Anthem KeyCare PPO Core					**ACR**
Employee only	$ 620.38	$ 558.36	$ 279.18	$ 62.02	$ 31.01
Employee + child(ren)	$ 1,112.86	$ 779.00	$ 389.50	$ 333.86	$ 166.93
Employee + spouse	$ 1,302.22	$ 911.54	$ 455.77	$ 390.68	$ 195.34
Employee + family	$ 1,859.76	$ 1,301.82	$ 650.91	$ 557.94	$ 278.97
Anthem KeyCare PPO Enhanced					**AEN**
Employee only	$ 683.48	$ 558.36	$ 279.18	$ 125.12	$ 62.56
Employee + child(ren)	$ 1,226.22	$ 779.00	$ 389.50	$ 447.22	$ 223.61
Employee + spouse	$ 1,431.12	$ 911.54	$ 455.77	$ 519.58	$ 259.79
Employee + family	$ 2,046.14	$ 1,301.82	$ 650.91	$ 744.32	$ 372.16
Kaiser - HMO					**KPF**
Employee only	$ 508.04	$ 484.18	$ 242.09	$ 23.86	$ 11.93
Employee + child(ren)	$ 899.32	$ 675.52	$ 337.76	$ 223.80	$ 111.90
Employee + spouse	$ 1,048.68	$ 790.48	$ 395.24	$ 258.20	$ 129.10
Employee + family	$ 1,500.38	$ 1,128.92	$ 564.46	$ 371.46	$ 185.73
Delta Dental Core					**DELF**
Employee only	$ 26.80	$ 13.40	$ 6.70	$ 13.40	$ 6.70
Employee + one	$ 50.56	$ 25.28	$ 12.64	$ 25.28	$ 12.64
Employee + two or more	$ 82.48	$ 41.24	$ 20.62	$ 41.24	$ 20.62
Delta Dental Enhanced					**DDEF**
Employee only	$ 36.86	$ 13.40	$ 6.70	$ 23.46	$ 11.73
Employee + one	$ 69.60	$ 25.28	$ 12.64	$ 44.32	$ 22.16
Employee + two or more	$ 113.52	$ 41.24	$ 20.62	$ 72.28	$ 36.14
VSP (Vision Service Plan)					**VSP**
Employee only	$ 9.32	$ -	$ -	$ 9.32	$ 4.66
Employee + child(ren)	$ 11.82	$ -	$ -	$ 11.82	$ 5.91
Employee + spouse	$ 11.56	$ -	$ -	$ 11.56	$ 5.78
Employee + family	$ 18.96	$ -	$ -	$ 18.96	$ 9.48