2022 Rates



Health Insurance Anthem Blue Cross and Blue Shield	Total Cost	Your Monthly Cost
BlueAdvantage Point of Service Plan (HMO/POS) and Prime Blue Priority PPO Plan		
Employee Only	\$676.00	\$101.40
Employee + Spouse	\$1,621.00	\$243.15
Employee + Child(ren)	\$1,487.00	\$223.05
Employee + Family	\$1,864.00	\$279.60
Blue Priority HMO Plan		
Employee Only	\$622.00	\$93.30
Employee + Spouse	\$1,492.00	\$223.80
Employee + Child(ren)	\$1,369.00	\$205.35
Employee + Family	\$1,717.00	\$257.55
Pathway EPO Plan		
Employee Only	\$608.00	\$91.20
Employee + Spouse	\$1,459.00	\$218.85
Employee + Child(ren)	\$1,338.00	\$200.70
Employee + Family	\$1,678.00	\$251.70
2500 HDHP Plan		
Employee Only	\$521.00	\$78.15
Employee + Spouse	\$1,247.00	\$187.05
Employee + Child(ren)	\$1,145.00	\$171.75
Employee + Family	\$1,436.00	\$215.40
☼ Dental Insurance		

Dental Insurance Anthem Blue Cross and Blue Shield

Anthem Dental Essential Choice PPO

Employee Only	\$40.12	\$6.02
Employee + Spouse	\$90.73	\$13.61
Employee + Child(ren)	\$86.92	\$13.04
Employee + Family	\$104.11	\$15.62

Vision Insurance

Anthem Blue Cross and Blue Shield

Blue View	Voluntary	Vision Plan
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Employee Only	\$7.89	\$7.89
Employee + Spouse	\$14.79	\$14.79
Employee + Child(ren)	\$14.79	\$14.79
Employee + Family	\$21.48	\$21.48



Basic Term Life Insurance (Life and AD&D)

Anthem Life (premiums per \$10,000 of coverage)

Active Employees \$0.28/\$1,000 \$0.00



Group Long Term Disability

Sun Life (Paid to a maximum salary of \$10,500 per month)

Active Employees \$0.240/\$100 \$0.00



Flexible Benefit Plan Administrative Fee

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One or Both Spending Accounts

\$3.50

\$0.00



Voluntary Term Life Insurance (Employee and/or Spouse) Sun Life (per \$1,000 of coverage)

Attained Age	<u>Uni- Smoker</u>
<25	\$0.039
25-29	\$0.042
30-34	\$0.053
35-39	\$0.063
40-44	\$0.076
45-49	\$0.135
50-54	\$0.213
55-59	\$0.388
60-64	\$0.524
65-69	\$0.912
70-74	\$1.463
75-79	\$2.880

Child Term Life

80-84

85-99

\$0.90 per \$5,000 per month

\$4.168

\$7.325



Accidental Death & Dismemberment

Sun Life (per \$1,000 of coverage)

Employee	\$0.014
Spouse	\$0.018
Child	\$0.024



Health Savings Account

WEX

Savings Account \$1.35



Voluntary Critical Illness Insurance (Employee and/or Spouse) Sun Life (per \$1,000 of coverage)

Attained Age	<u>Uni- Smoker</u>
<25	\$0.034
25-29	\$0.039
30-34	\$0.510
35-39	\$0.710
40-44	\$1.090
45-49	\$1.610
50-54	\$2.310
55-59	\$3.230
60-64	\$4.000
65-69	\$4.630
70-74	\$5.940
75+	\$8.110
Child Benefit	\$0.200



Accident Insurance

Employee Only	\$5.60
Employee + Spouse	\$9.29
Employee + Child(ren)	\$10.20
Employee + Family	\$13.89



Hospital Insurance

Employee Only	\$14.75
Employee + Spouse	\$31.11
Employee + Child(ren)	\$24.96
Employee + Family	\$41.32















