



## Health Insurance

Anthem Blue Cross and Blue Shield

**TOTAL COST** 

YOUR MONTHLY COST

BlueAdvantage Point of Service Plan (HMO/POS), Prime Blue Priority PPO Plan, and Custom Plus Health Plan				
Employee Only	\$697.00	\$279.00		
Employee + Spouse	\$1,671.00	\$668.00		
Employee + Child(ren)	\$1,533.00	\$613.00		
Employee + Family	\$1,922.00	\$769.00		
Blue Priority HMO Plan				
Employee Only	\$641.00	\$256.00		
Employee + Spouse	\$1,538.00	\$615.00		
Employee + Child(ren)	\$1,411.00	\$564.00		
Employee + Family	\$1,770.00	\$708.00		
2500 HDHP Plan				
Employee Only	\$537.00	\$215.00		
Employee + Spouse	\$1,286.00	\$514.00		
Employee + Child(ren)	\$1,180.00	\$472.00		
Employee + Family	\$1,480.00	\$592.00		

M	Dental	Insu	ırar	nce
	Anthem Blue	Cross a	nd Blu	ıe Shiel

Anthem Dental Essential Choice PPO		
Employee Only	\$38.95	\$19.00
Employee + Spouse	\$88.09	\$44.00
Employee + Child(ren)	\$84.39	\$42.00
Employee + Family	\$101.08	\$50.00

## Vision Insurance

## Anthem Blue Cross and Blue Shield

Blue View Voluntary Vision Plan		
Employee Only	\$8.68	\$8.68
Employee + Spouse	\$16.26	\$16.26
Employee + Child(ren)	\$16.26	\$16.26
Employee + Family	\$23.62	\$23.62