

Commonwealth of Virginia State Health Benefits Program Non-Medicare Retiree Monthly Premiums for July 1, 2017 - June 30, 2018

Please note: Get a premium reward if you are enrolled in COVA Care or COVA HealthAware! You or your spouse can complete certain health activities to pay \$17 less a month or \$34 less when both of you meet the requirements.

Health Care Plans		Premium			Premium with Rewards				
		You Only	You Plus One	You Plus Two or More	You Only	You Plus Spouse	You Plus Spouse and More		
					Employee	Employee or Spouse	Employee & Spouse	Employee or Spouse	Employee & Spouse
COVA Care	Total Premium	\$735	\$1,360	\$1,972	\$718	\$1,343	\$1,326	\$1,955	\$1,938
COVA Care + Out-of-Network	Total Premium	\$752	\$1,384	\$2,004	\$735	\$1,367	\$1,350	\$1,987	\$1,970
COVA Care + Expanded Dental	Total Premium	\$766	\$1,419	\$2,063	\$749	\$1,402	\$1,385	\$2,046	\$2,029
COVA Care + Out-of-Network + Expanded Dental	Total Premium	\$783	\$1,443	\$2,095	\$766	\$1,426	\$1,409	\$2,078	\$2,061
COVA Care + Expanded Dental + Vision & Hearing	Total Premium	\$784	\$1,450	\$2,105	\$767	\$1,433	\$1,416	\$2,088	\$2,071
COVA Care + Out-of-Network + Expanded Dental + Vision & Hearing	Total Premium	\$801	\$1,474	\$2,137	\$784	\$1,457	\$1,440	\$2,120	\$2,103
COVA HealthAware	Total Premium	\$665	\$1,233	\$1,783	\$648	\$1,216	\$1,199	\$1,766	\$1,749
COVA HealthAware + Expanded Dental	Total Premium	\$695	\$1,293	\$1,873	\$678	\$1,276	\$1,259	\$1,856	\$1,839
COVA HealthAware + Expanded Dental & Vision	Total Premium	\$706	\$1,310	\$1,896	\$689	\$1,293	\$1,276	\$1,879	\$1,862
COVA HDHP	Total Premium	\$551	\$1,024	\$1,496					
COVA HDHP + Expanded Dental	Total Premium	\$581	\$1,083	\$1,586					
Kaiser Permanente HMO – (available primarily in Northern Virginia)	Total Premium	\$625	\$1,150	\$1,675					
TRICARE Voluntary Supplement*	Total Premium	\$61	\$120	\$161					

*Washington State residents contact the Office of Health Benefits for mandated premium amount