## COMMONWEALTH OF VIRGINIA STATE HEALTH BENEFITS PROGRAM

## **EMPLOYEE MONTHLY PREMIUMS**FOR JULY 1, 2022 - JUNE 30, 2023

Salaried employees working 30 hours or more a week pay the "Employee Pays" amount. Salaried employees working less than 30 hours a week pay the "Total Premium."

PLEASE NOTE: Get a Premium Reward if you are enrolled in COVA Care or COVA HealthAware! You or your enrolled spouse can complete a health assessment to earn a \$17 monthly premium incentive or \$34 incentive when both of you meet the requirements. Since the incentive is a cash reward, it is taxable to the employee.



## **REVISED JUNE 2022**



NL JU, ZUZJ		PREMIUM		
HEALTH CARE PLANS		You Only	You Plus One	You Plus Two or More
COVA Care	Employee Pays State Pays Total Premium	<b>\$94</b> <u>\$709</u> <b>\$803</b>	<b>\$217</b> <u>\$1,268</u> <b>\$1,485</b>	<b>\$295</b> <u>\$1,859</u> <b>\$2,154</b>
COVA Care + Out-of-Network	Employee Pays State Pays Total Premium	\$113 \$709 \$822	\$251 \$1,268 \$1,519	\$346 \$1,859 <b>\$2,205</b>
COVA Care + Expanded Dental	Employee Pays State Pays Total Premium	\$128 \$709 \$837	\$280 \$1,268 <b>\$1,548</b>	\$387 \$1,859 \$2,246
COVA Care + Out-of-Network + Expanded Dental	Employee Pays State Pays Total Premium	\$147 \$709 \$856	\$314 \$1,268 \$1,582	\$438 \$1,859 \$2,297
COVA Care + Expanded Dental + Vision & Hearing	Employee Pays State Pays Total Premium	\$148 \$709 \$857	\$316 \$1,268 \$1,584	\$440 \$1,859 \$2,299
COVA Care + Out-of-Network + Expanded Dental + Vision & Hearing	Employee Pays State Pays Total Premium	\$166 \$709 \$875	\$350 \$1,268 \$1,618	\$490 \$1,859 \$2,349
COVA HealthAware	Employee Pays State Pays Total Premium	\$17 \$695 \$712	\$52 \$1,268 \$1,320	\$53 \$1,856 \$1,909
COVA HealthAware + Expanded Dental	Employee Pays State Pays Total Premium	\$49 \$695 \$744	\$111 \$1,268 \$1,379	\$139 \$1,856 \$1,995
COVA HealthAware + Expanded Dental & Vision	Employee Pays State Pays Total Premium	\$60 \$695 <b>\$755</b>	\$132 \$1,268 \$1,400	\$169 \$1,856 <b>\$2,025</b>
COVA HDHP	Employee Pays State Pays Total Premium	\$0 \$602 \$602	\$0 \$1,120 <b>\$1,120</b>	\$0 \$1,637 <b>\$1,637</b>
COVA HDHP + Expanded Dental	Employee Pays State Pays Total Premium	\$33 \$602 \$635	\$61 \$1,120 \$1,181	\$89 \$1,637 <b>\$1,726</b>
Kaiser Permanente HMO (available primarily in Northern Virginia)	Employee Pays State Pays Total Premium	\$77 \$675 <b>\$752</b>	\$183 \$1,199 <b>\$1,382</b>	\$261 \$1,753 <b>\$2,014</b>
Optima Health Vantage HMO + Expanded Dental & Vision (Hampton Roads area)	Employee Pays State Pays Total Premium	\$77 \$705 \$782	\$183 \$1,264 <b>\$1,447</b>	\$261 \$1,834 \$2,095
TRICARE Voluntary Supplement*	Total Premium	\$61	\$120	\$161

<sup>\*</sup> Washington State Residents contact Office of Health Benefits for Washington State mandated TRICARE premium amount