

COMMONWEALTH OF VIRGINIA STATE HEALTH BENEFITS PROGRAM

EMPLOYEE MONTHLY PREMIUMS FOR JULY 1, 2021 - JUNE 30, 2022

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 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	Employee Pays	\$94	\$217	\$295	\$77	\$200	\$183	\$278	\$261
	State Pays	\$709	\$1,268	\$1,859	\$709	\$1,268	\$1,268	\$1,859	\$1,859
	Total Premium	\$803	\$1,485	\$2,154	\$786	\$1,468	\$1,451	\$2,137	\$2,120
COVA Care + Out-of-Network	Employee Pays	\$113	\$251	\$346	\$96	\$234	\$217	\$329	\$312
	State Pays	\$709	\$1,268	\$1,859	\$709	\$1,268	\$1,268	\$1,859	\$1,859
	Total Premium	\$822	\$1,519	\$2,205	\$805	\$1,502	\$1,485	\$2,188	\$2,171
COVA Care + Expanded Dental	Employee Pays	\$128	\$280	\$387	\$111	\$263	\$246	\$370	\$353
	State Pays	\$709	\$1,268	\$1,859	\$709	\$1,268	\$1,268	\$1,859	\$1,859
	Total Premium	\$837	\$1,548	\$2,246	\$820	\$1,531	\$1,514	\$2,229	\$2,212
COVA Care + Out-of-Network + Expanded Dental	Employee Pays	\$147	\$314	\$438	\$130	\$297	\$280	\$421	\$404
	State Pays	\$709	\$1,268	\$1,859	\$709	\$1,268	\$1,268	\$1,859	\$1,859
	Total Premium	\$856	\$1,582	\$2,297	\$839	\$1,565	\$1,548	\$2,280	\$2,263
COVA Care + Expanded Dental + Vision & Hearing	Employee Pays	\$148	\$316	\$440	\$131	\$299	\$282	\$423	\$406
	State Pays	\$709	\$1,268	\$1,859	\$709	\$1,268	\$1,268	\$1,859	\$1,859
	Total Premium	\$857	\$1,584	\$2,299	\$840	\$1,567	\$1,550	\$2,282	\$2,265
COVA Care + Out-of-Network + Expanded Dental + Vision & Hearing	Employee Pays	\$166	\$350	\$490	\$149	\$333	\$316	\$473	\$456
	State Pays	\$709	\$1,268	\$1,859	\$709	\$1,268	\$1,268	\$1,859	\$1,859
	Total Premium	\$875	\$1,618	\$2,349	\$858	\$1,601	\$1,584	\$2,332	\$2,315
COVA HealthAware	Employee Pays	\$17	\$52	\$53	\$0	\$35	\$18	\$36	\$19
	State Pays	\$695	\$1,268	\$1,856	\$695	\$1,268	\$1,268	\$1,856	\$1,856
	Total Premium	\$712	\$1,320	\$1,909	\$695	\$1,303	\$1,286	\$1,892	\$1,875
COVA HealthAware + Expanded Dental	Employee Pays	\$49	\$111	\$139	\$32	\$94	\$77	\$122	\$105
	State Pays	\$695	\$1,268	\$1,856	\$695	\$1,268	\$1,268	\$1,856	\$1,856
	Total Premium	\$744	\$1,379	\$1,995	\$727	\$1,362	\$1,345	\$1,978	\$1,961
COVA HealthAware + Expanded Dental & Vision	Employee Pays	\$60	\$132	\$169	\$43	\$115	\$98	\$152	\$135
	State Pays	\$695	\$1,268	\$1,856	\$695	\$1,268	\$1,268	\$1,856	\$1,856
	Total Premium	\$755	\$1,400	\$2,025	\$738	\$1,383	\$1,366	\$2,008	\$1,991
COVA HDHP	Employee Pays	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	State Pays	\$602	\$1,120	\$1,637	\$602	\$1,120	\$1,120	\$1,637	\$1,637
	Total Premium	\$602	\$1,120	\$1,637	\$602	\$1,120	\$1,120	\$1,637	\$1,637
COVA HDHP + Expanded Dental	Employee Pays	\$33	\$61	\$89	\$33	\$94	\$77	\$122	\$105
	State Pays	\$602	\$1,120	\$1,637	\$602	\$1,120	\$1,120	\$1,637	\$1,637
	Total Premium	\$635	\$1,181	\$1,726	\$635	\$1,214	\$1,197	\$1,769	\$1,742
Kaiser Permanente HMO (available primarily in Northern Virginia)	Employee Pays	\$77	\$183	\$261	\$77	\$200	\$183	\$278	\$261
	State Pays	\$641	\$1,137	\$1,662	\$641	\$1,137	\$1,137	\$1,662	\$1,662
	Total Premium	\$718	\$1,320	\$1,923	\$718	\$1,337	\$1,320	\$1,940	\$1,923
Optima Health Vantage HMO (Hampton Roads area)	Employee Pays	\$77	\$183	\$261	\$77	\$200	\$183	\$278	\$261
	State Pays	\$702	\$1,259	\$1,826	\$702	\$1,259	\$1,259	\$1,826	\$1,826
	Total Premium	\$779	\$1,442	\$2,087	\$779	\$1,459	\$1,442	\$2,104	\$2,087
TRICARE Voluntary Supplement*	Employee Pays	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
	Total Premium	\$61	\$120	\$161	\$61	\$120	\$161	\$161	\$161

**PREMIUM AND PLAN BENEFITS
MAY CHANGE SUBJECT TO
FINAL STATE BUDGET APPROVAL.**



* Washington State Residents contact Office of Health Benefits for Washington State mandated TRICARE premium amount