

## Commonwealth of Virginia Health Benefits Program Non-Medicare Retiree Monthly Premiums for July 1, 2016 - June 30, 2017

Non-Medicare eligible retiree group members pay the total premium.

**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	\$677	\$1,254	\$1,817	\$660	\$1,237	\$1,220	\$1,800	\$1,783
COVA Care + Out-of-Network	Total Premium	\$693	\$1,276	\$1,847	\$676	\$1,259	\$1,242	\$1,830	\$1,813
COVA Care + Expanded Dental	Total Premium	\$706	\$1,309	\$1,901	\$689	\$1,292	\$1,275	\$1,884	\$1,867
COVA Care + Out-of-Network + Expanded Dental	Total Premium	\$722	\$1,331	\$1,931	\$705	\$1,314	\$1,297	\$1,914	\$1,897
COVA Care + Expanded Dental + Vision & Hearing	Total Premium	\$723	\$1,338	\$1,940	\$706	\$1,321	\$1,304	\$1,923	\$1,906
COVA Care + Out-of Network + Expanded Dental + Vision & Hearing	Total Premium	\$739	\$1,360	\$1,970	\$722	\$1,343	\$1,326	\$1,953	\$1,936
COVA HealthAware	Total Premium	\$616	\$1,142	\$1,650	\$599	\$1,125	\$1,108	\$1,633	\$1,616
COVA HealthAware + Expanded Dental	Total Premium	\$644	\$1,197	\$1,733	\$627	\$1,180	\$1,163	\$1,716	\$1,699
COVA HealthAware + Expanded Dental & Vision	Total Premium	\$654	\$1,213	\$1,754	\$637	\$1,196	\$1,179	\$1,737	\$1,720
COVA HDHP	Total Premium	\$511	\$949	\$1,387					
COVA HDHP + Expanded Dental	Total Premium	\$539	\$1,004	\$1,470					
Kaiser Permanente HMO – (available primarily in Northern Virginia)	Total Premium	\$595	\$1,095	\$1,595					
TRICARE Voluntary Supplement	Total Premium	\$61	\$120	\$161					