

## Medical Coverage - Anthem

### Monthly Premiums HK-POS (Plan 1) – Employee Deduction for Insurance

	Employee Bi-wkly Deduction	Rivanna Monthly Contribution	Total Monthly Premium
Employee Only	\$17.50	\$849.09	\$884.09
Employee & Child	\$55.50	\$1096.66	\$1207.66
Employee & Children	\$163.50	\$1470.37	\$1797.37
Employee & Spouse	\$186.50	\$1607.36	\$1980.36
Employee & Family	\$227.00	\$2273.41	\$2727.41

### Monthly Premiums HK POS HSA - HDHP (Plan 2) – Employee Deduction for Insurance

	Employee Bi-wkly Deduction	Rivanna Monthly Contribution	Total Premium
Employee Only	\$2.50	\$743.04	\$748.04
Employee & Child	\$35.00	\$951.82	\$1021.82
Employee & Children	\$132.50	\$1255.78	\$1520.78
Employee & Spouse	\$152.50	\$1370.61	\$1675.61
Employee & Family	\$180.00	\$1947.70	\$2307.70

## Dental Coverage - Principal

### Monthly Premiums Principal Dental – Employee Deduction for Insurance

	Employee Bi-wkly Deduction	Rivanna Monthly Contribution	Total Premium
Employee Only	\$3.50	\$19.74	\$26.74
Employee & Child(ren)	\$5.00	\$58.14	\$68.14
Employee & Spouse	\$5.00	\$45.66	\$55.66
Employee & Family	\$7.50	\$82.01	\$97.01

## Vision Coverage – Principal

### Monthly Premiums Principal Vision – Employer Benefit for Insurance

	Employee Bi-wkly Deduction	Rivanna Monthly Contribution	Total Premium
Employee Only	\$0.00	\$7.66	\$7.66
Employee & Child(ren)	\$0.00	\$16.47	\$16.47
Employee & Spouse	\$0.00	\$13.31	\$13.31
Employee & Family	\$0.00	\$22.16	\$22.16