



# COUNTY OF FLUVANNA

## FY17 HEALTH CARE CONTRIBUTION SCHEDULE Anthem / The Local Choice Health Care Plans July 1, 2016– June 30, 2017

The plans include the Key Advantage 250 (KA250) and Key Advantage 500 (KA500) with Dental and Vision included in both plans. A high deductible health plan (HDHP) with Dental, Vision and a Health Savings Account is also available.

Plan	Monthly Total Cost	County Pays Monthly	Employee Pays per month	Employee Bi-weekly Deduction (24)	HEALTH SAVINGS ACCOUNT County Pays/MTH
<b>Employee Only Plan</b>					
<b>HDHP</b> With Preventative Dental	\$ 434.00	\$434.00	\$ 0.00	\$ 0.00	\$100.00
<b>KA 500</b> With Preventative Dental	\$ 555.00	\$ 510.00	\$ 45.00	\$ 22.50	N/A
<b>KA250</b> With Preventative Dental	\$604.00	\$ 510.00	\$ 94.00	\$47.00	N/A
<b>HDHP</b> With Comprehensive Dental	\$ 445.00	\$ 445.00	\$ 0.00	\$ 0.00	\$100.00
<b>KA 500</b> With Comprehensive Dental	\$ 566.00	\$ 510.00	\$ 56.00	\$ 28.00	N/A
<b>KA 250</b> With Comprehensive Dental	\$ 615.00	\$ 510.00	\$ 105.00	\$ 52.50	N/A
<b>Employee plus 1</b>					
<b>HDHP</b> With Preventative Dental	\$ 803.00	\$ 745.00	\$ 58.00	\$ 29.00	\$100.00
<b>KA 500</b> With Preventative Dental	\$ 1,027.00	\$ 745.00	\$ 282.00	\$ 141.00	N/A
<b>KA250</b> With Preventative Dental	\$1,117.00	\$ 745.00	\$ 372.00	\$ 186.00	N/A
<b>HDHP</b> With Comprehensive Dental	\$ 823.00	\$ 745.00	\$ 78.00	\$ 39.00	\$100.00
<b>KA 500</b> With Comprehensive Dental	\$ 1,047.00	\$ 745.00	\$ 302.00	\$ 151.00	N/A
<b>KA 250</b> With Comprehensive Dental	\$ 1,138.00	\$ 745.00	\$ 393.00	\$ 196.50	N/A
<b>Employee/Family</b>					
<b>HDHP</b> With Preventative Dental	\$1,172.00	\$ 975.00	\$ 197.00	\$ 98.50	\$100.00
<b>KA 500</b> With Preventative Dental	\$1,499.00	\$ 975.00	\$524.00	\$ 262.00	N/A
<b>KA250</b> With Preventative Dental	\$1,631.00	\$ 975.00	\$ 656.00	\$328.00	N/A
<b>HDHP</b> With Comprehensive Dental	\$ 1,202.00	\$ 975.00	\$ 227.00	\$113.50	\$100.00
<b>KA 500</b> With Comprehensive Dental	\$1,528.00	\$ 975.00	\$ 553.00	\$ 276.50	N/A
<b>KA 250</b> With Comprehensive Dental	\$ 1,661.00	\$ 975.00	\$ 686.00	\$ 343.00	N/A