

2024 Rates



Health Insurance

Anthem Blue Cross and Blue Shield

TOTAL COST

YOUR MONTHLY COST

BlueAdvantage Point of Service Plan (HMO/POS) and Prime Blue Priority PPO Plan

Plan Type	TOTAL COST	YOUR MONTHLY COST
Employee Only	\$811.00	\$405.50
Employee + Spouse	\$1,948.00	\$974.00
Employee + Child(ren)	\$1,786.00	\$893.00
Employee + Family	\$2,238.00	\$1,119.00

2500 HDHP Plan

Plan Type	TOTAL COST	YOUR MONTHLY COST
Employee Only	\$678.00	\$101.93
Employee + Spouse	\$1,629.00	\$814.50
Employee + Child(ren)	\$1,493.00	\$746.50
Employee + Family	\$1,872.00	\$936.00



Health Savings Account

WEX

Account Type	TOTAL COST	YOUR MONTHLY COST
Savings Account	\$1.35	\$1.35



Dental Insurance

Anthem Blue Cross and Blue Shield

Anthem Dental Essential Choice PPO

Plan Type	TOTAL COST	YOUR MONTHLY COST
Employee Only	\$42.21	\$42.21
Employee + Spouse	\$95.45	\$95.45
Employee + Child(ren)	\$91.44	\$91.44
Employee + Family	\$109.52	\$109.52

