

Health Insurance Rates
Administered by Anthem (The Local Choice)

2015/2016

Key Advantage 500 (**includes dental & vision)				
	Total Cost	Employer Share	Employee Share	**H/W Employed
Single	\$ 612.00	\$ 476.40	\$ 135.60	
Dual	\$ 1,132.00	\$ 476.40	\$ 655.60	\$ 179.20
Family	\$ 1,652.00	\$ 476.40	\$ 1,175.60	\$ 699.20

Key Advantage 1000 (**Includes dental & vision)				
	Total Cost	Employer Share	Employee Share	**H/W Employed
Single	\$ 579.00	\$ 476.40	\$ 102.60	
Dual	\$ 1,071.00	\$ 476.40	\$ 594.60	\$ 118.20
Family	\$ 1,563.00	\$ 476.40	\$ 1,086.60	\$ 610.20

Key Advantage HDHP (**Includes dental & vision)				
	Total Cost	Employer Share	Employee Share	**H/W Employed
Single	\$ 484.00	\$ 476.40	\$ 7.60	
Dual	\$ 895.00	\$ 476.40	\$ 418.60	\$ (57.80)
Family	\$ 1,307.00	\$ 476.40	\$ 830.60	\$ 354.20

**Husband & Wife both employed by Middlesex County Public Schools

**Dental coverage is administered through Delta Dental of Virginia

**Vision coverage is administered through Blue View Vision