Insurance Plan Rates

Monthly Insurance Premiums Effective July 1, 2021

		Self	Self + Child(ren)	Self + Adult	Family
Anthem Blue Cross HMO		*	\$0.00 \$1,090.84		\$0.00 \$1,901.22
Anthem Blue Cross PPO	Your Contribution UC Contribution	T	Ŧ	T	\$90.00 \$2,066.12
Delta Dental PPO	Your Contribution UC Contribution	T	Ŧ	•	\$0.00 \$78.22
Vision Service Plan PPO		*	T	•	\$0.00 \$16.19