2022 Health, Dental, Vision and Accident Plan Premiums



(Effective January 1, 2022)

Non-High Deductible Health Plans	Single (monthly)	Single (biweekly)	Family (monthly)	Family (biweekly)	
IYC Plan with Dental	\$99.00	\$49.50	\$246.00	\$123.00	
IYC Plan without Dental	\$96.00	\$48.00	\$237.00	\$118.50	
Access with Dental	\$260.00	\$130.00	\$648.00	\$324.00	
Access without Dental	\$257.00	\$128.50	\$639.00	\$319.50	
Access with Dental (required to work out of state)	\$154.00	\$77.00	\$389.00	\$194.00	
Access without Dental (required to work out of state)	\$151.00	\$75.50	\$380.00	\$190.00	

High Deductible Health Plans	Single (monthly)	Single (biweekly)	Family (monthly)	Family (biweekly)	
HDHP Plan with Dental	\$37.00	\$18.50	\$92.00	\$46.00	
HDHP Plan without Dental	\$34.00	\$17.00	\$83.00	\$41.50	
HDHP Access with Dental	\$198.00	\$99.00	\$494.00	\$247.00	
HDHP Access without Dental	\$195.00	\$97.50	\$485.00	\$242.50	
HDHP Access with Dental (required to work out of state)	\$92.00	\$46.00	\$235.00	\$117.50	
HDHP Access without Dental (required to work out of state)	\$89.00	\$44.50	\$226.00	\$113.00	

2022 Premiums	Employee (monthly)	Employee (biweekly)	Employee + Spouse (monthly)	Employee + Spouse (biweekly)	Employee + Child(ren) (monthly)	Employee + Child(ren) (biweekly)	Family (monthly)	Family (biweekly)
Delta Dental PPO – Select Plan	\$9.76	\$4.88	\$19.52	\$9.76	\$13.16	\$6.58	\$23.40	\$11.70
Delta Dental PPO – Select Plus Plan	\$20.98	\$10.49	\$41.96	\$20.98	\$38.96	\$19.48	\$64.28	\$32.14
Delta Dental – Preventive (no health)	\$34.72	\$17.36	n/a	n/a	n/a	n/a	\$86.80	\$43.40
DeltaVision	\$5.72	\$2.86	\$11.42	\$5.71	\$12.88	\$6.44	\$20.58	\$10.29
Accident Plan	\$4.38	\$2.19	\$6.26	\$3.13	\$8.44	\$4.22	\$12.32	\$6.16