

## Health Insurance Premiums 2021 Plan Year

Health Insurance Provided by Anthem  
Prescription Drug Coverage Provided by IngenioRx

### Employees Paid Monthly

Group Health Plans	PPO Plan 4	HMO Plan 9	PPO HD Plan 7
Employee Only	\$195.60	\$177.30	\$156.90
Employee + Child(ren)	\$351.90	\$318.60	\$282.60
Employee + Spouse**	\$391.20	\$355.20	\$315.00
Family**	\$613.80	\$551.10	\$488.70

### Employees Paid Biweekly-26

Payroll deductions are taken over 26 pay periods.

Group Health Plans	PPO Plan 4	HMO Plan 9	PPO HD Plan 7
Employee Only	\$90.28	\$81.83	\$72.42
Employee + Child(ren)	\$162.42	\$147.05	\$130.43
Employee + Spouse**	\$180.55	\$163.94	\$145.38
Family**	\$283.29	\$254.35	\$225.55

### Employees Paid Biweekly-20

Payroll deductions are taken over 20 pay periods.

Group Health Plans	PPO Plan 4	HMO Plan 9	PPO HD Plan 7
Employee Only	\$117.36	\$106.38	\$94.14
Employee + Child(ren)	\$211.14	\$191.16	\$169.56
Employee + Spouse**	\$234.72	\$213.12	\$189.00
Family**	\$368.28	\$330.66	\$293.22

### Spousal Coverage

Employees who wish to carry their spouse on the Roanoke College health insurance must sign a spousal affidavit verifying that their spouse falls in one of the following categories:

- Their spouse is not employed (this includes retired spouses.)
- Their spouse does not have access to affordable, minimum essential coverage through their employer.\* (Self-employed without insurance, Medicare and COBRA do not meet this definition; your spouse is eligible for coverage.)
- Their spouse is employed at Roanoke College or another VPCBC member school.