## MONTHLY PREMIUMS: EMPLOYEE ONLY

The premiums listed here are for employees of State agencies, colleges and universities and county boards of education with no enrolled dependents. Premiums are based on the employee's annual salary. The premiums listed here are charged monthly. For PEIA PPB Plans A and B, the out-of-network deductible and out-of-pocket maximum amounts are double the in-network amounts listed below. PEIA offers a Tobacco-free Premium Discount of \$25 per month to policyholders who are tobacco-free. To report a change in your tobacco status, call PEIA's Open Enrollment Helpline or go to **peia.wv.gov** and click on "Manage My Benefits".

Employee Only	The Health Plan Plan A	The Health Plan Plan B	The Health Plan POS	PEIA PPB Plan A Premium	PEIA PPB Plan A Annual Deductible	PEIA PPB Plan A Out-of-Pocket Maximum	PEIA PPB Plan B Premium	PEIA PPB Plan B Annual Deductible	PEIA PPB Plan B Out-of-Pocket Maximum	PEIA PPB Plan C Premium (not salary-based)	PEIA PPB Plan C Annual Deductible	PEIA PPB Plan C Out-of-Pocket Maximum	PEIA PPB Plan D Premium	PEIA PPB Plan D Annual Deductible	PEIA PPB Plan D Out-of-Pocket Maximum
\$0 - \$28,100	\$98	\$47	\$59	\$64	\$325	\$1,800	\$44	\$725	\$3,000				\$53	\$325	\$1,800
\$28,101 -\$38,100	\$115	\$52	\$64	\$81	\$375	\$2,100	\$50	\$725	\$3,000				\$68	\$375	\$2,100
\$38,101 -\$44,100	\$122	\$55	\$67	\$88	\$425	\$2,250	\$53	\$725	\$3,000				\$75	\$425	\$2,250
\$44,101 - \$50,100	\$128	\$57	\$69	\$94	\$450	\$2,500	\$55	\$725	\$3,000				\$79	\$450	\$2,500
\$50,101 - \$58,100	\$143	\$63	\$75	\$109	\$475	\$2,750	\$61	\$1,225	\$3,000	***	64 400	<b>*</b> 0 500	\$93	\$475	\$2,750
\$58,101 - \$70,600	\$166	\$73	\$85	\$132	\$600	\$2,800	\$71	\$1,225	\$3,000	\$85	\$1,400	\$2,500	\$112	\$600	\$2,800
\$70,601 - \$83,100	\$180	\$80	\$92	\$146	\$625	\$2,850	\$78	\$1,225	\$3,000				\$124	\$625	\$2,850
\$83,101 - \$108,100	\$209	\$92	\$104	\$176	\$650	\$2,900	\$90	\$1,225	\$3,000				\$149	\$650	\$2,900
\$108,101 -\$133,100	\$252	\$130	\$142	\$219	\$725	\$3,000	\$127	\$1,225	\$3,000				\$186	\$725	\$3,000
\$133,101+	\$282	\$152	\$164	\$249	\$825	\$3,250	\$150	\$1,225	\$3,000				\$212	\$825	\$3,250

## MONTHLY PREMIUMS: EMPLOYEE AND CHILD(REN)

The premiums on this page are for employees of State agencies, colleges and universities and county board of education who have only the policyholder and dependent child(ren) on their policy. The premiums are based on the employee's annual salary. The premiums listed here are charged monthly. For PEIA PPB Plans A and B, the out-of-network deductible and out-of-pocket maximum amounts are double the in-network amounts listed below. PEIA offers a Tobacco-free Premium Discount of \$50 per month to Employee and Child(ren) policyholders when all enrolled family members are tobacco-free. To report a change in your tobacco status, call PEIA's Open Enrollment Helpline or go to **peia.wv.gov** and click on "Manage My Benefits".

Employee and Child(ren)	The Health Plan Plan A	The Health Plan Plan B	The Health Plan POS	PEIA PPB Plan A Premium	PEIA PPB Plan A Annual Deductible	PEIA PPB Plan A Out-of-Pocket Maximum	PEIA PPB Plan B Premium	PEIA PPB Plan B Annual Deductible	PEIA PPB Plan B Out-of-Pocket Maximum	PEIA PPB Plan C Premium (not salary-based)	PEIA PPB Plan C Annual Deductible	PEIA PPB Plan C Out-of-Pocket Maximum	PEIA PPB Plan D Premium	PEIA PPB Plan D Annual Deductible	PEIA PPB Plan D Out-of-Pocket Maximum
\$0 - \$28,100	\$184	\$69	\$92	\$127	\$650	\$3,600	\$74	\$1,450	\$6,000				\$106	\$650	\$3,600
\$28,101 -\$38,100	\$208	\$78	\$102	\$151	\$750	\$4,200	\$83	\$1,450	\$6,000				\$126	\$750	\$4,200
\$38,101 - \$44,100	\$217	\$82	\$105	\$160	\$850	\$4,500	\$87	\$1,450	\$6,000				\$134	\$850	\$4,500
\$44,101 -\$50,100	\$230	\$86	\$109	\$174	\$900	\$5,000	\$91	\$1,450	\$6,000				\$145	\$900	\$5,000
\$50,101 -\$58,100	\$264	\$108	\$131	\$208	\$950	\$5,500	\$113	\$1,950	\$6,000	6400	<b>*</b> 0.000	<b>¢</b> E 000	\$175	\$950	\$5,500
\$58,101 - \$70,600	\$307	\$141	\$164	\$250	\$1,200	\$5,600	\$146	\$1,950	\$6,000	\$182	\$2,800	\$5,000	\$211	\$1,200	\$5,600
\$70,601 - \$83,100	\$339	\$161	\$184	\$283	\$1,250	\$5,700	\$166	\$1,950	\$6,000				\$238	\$1,250	\$5,700
\$83,101 - \$108,100	\$403	\$203	\$227	\$346	\$1,300	\$5,800	\$208	\$1,950	\$6,000				\$293	\$1,300	\$5,800
\$108,101 - \$133,100	\$466	\$257	\$280	\$410	\$1,450	\$6,000	\$262	\$1,950	\$6,000				\$347	\$1,450	\$6,000
\$133,101+	\$524	\$297	\$320	\$467	\$1,650	\$6,500	\$302	\$1,950	\$6,000				\$397	\$1,650	\$6,500

You also can view your benefits in the Summary of Benefits and Coverage at **peia.wv.gov**. Call **1-877-676-5573**.

## **MONTHLY PREMIUMS: FAMILY**

The premiums on this page are for employees of State agencies, colleges and universities and county board of education. The premiums are based on the employee's annual salary. The premiums listed here are charged monthly. For PEIA PPB Plans A and B, the out-of-network deductible and out-of-pocket maximum amounts are double the in-network amounts listed below. PEIA offers a Tobacco-free Premium Discount of \$50 per month to family policyholders when all enrolled family members are tobacco-free. To report a change in your tobacco status, call PEIA's Open Enrollment Helpline or go to **peia.wv.gov** and click on "Manage My Benefits".

Family	The Health Plan Plan A	The Health Plan Plan B	The Health Plan POS	PEIA PPB Plan A Premium	PEIA PPB Plan A Annual Deductible	PEIA PPB Plan A Out-of-Pocket Maximum	PEIA PPB Plan B Premium	PEIA PPB Plan B Annual Deductible	PEIA PPB Plan B Out-of-Pocket Maximum	PEIA PPB Plan C Premium (not salary-based)	PEIA PPB Plan C Annual Deductible	PEIA PPB Plan C Out-of-Pocket Maximum	PEIA PPB Plan D Premium	PEIA PPB Plan D Annual Deductible	PEIA PPB Plan D Out-of-Pocket Maximum
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\$0 - \$28,100	\$230	\$163	\$182	\$185	\$650	\$3,600	\$118	\$1,450	\$6,000				\$149	\$650	\$3,600
\$28,101 -\$38,100	\$280	\$190	\$209	\$234	\$750	\$4,200	\$145	\$1,450	\$6,000				\$192	\$750	\$4,200
\$38,101 - \$44,100	\$307	\$204	\$223	\$261	\$850	\$4,500	\$159	\$1,450	\$6,000				\$215	\$850	\$4,500
\$44,101 - \$50,100	\$336	\$220	\$239	\$291	\$900	\$5,000	\$175	\$1,450	\$6,000				\$239	\$900	\$5,000
\$50,101 - \$58,100	\$387	\$253	\$272	\$341	\$950	\$5,500	\$207	\$1,950	\$6,000	\$304	\$2,800	\$5,000	\$283	\$950	\$5,500
\$58,101 - \$70,600	\$454	\$296	\$315	\$409	\$1,200	\$5,600	\$251	\$1,950	\$6,000	<b>\$304</b>	\$2,000	\$5,000	\$341	\$1,200	\$5,600
\$70,601 - \$83,100	\$487	\$320	\$339	\$442	\$1,250	\$5,700	\$275	\$1,950	\$6,000				\$369	\$1,250	\$5,700
\$83,101 - \$108,100	\$573	\$389	\$408	\$528	\$1,300	\$5,800	\$343	\$1,950	\$6,000				\$443	\$1,300	\$5,800
\$108,101 - \$133,100	\$691	\$476	\$495	\$646	\$1,450	\$6,000	\$431	\$1,950	\$6,000				\$544	\$1,450	\$6,000
\$133,101+	\$792	\$545	\$564	\$747	\$1,650	\$6,500	\$499	\$1,950	\$6,000				\$630	\$1,650	\$6,500

## MONTHLY PREMIUMS: FAMILY WITH EMPLOYEE SPOUSE

The premiums on this page are for employees of State agencies, colleges and universities and county board of education who are married to other benefit-eligible public employees. To quality for these premiums, BOTH public employees must have Basic Life Insurance. The premiums are based on the average of the two employees' annual salaries. The premiums listed here are charged monthly. For PEIA PPB Plans A and B, the out-of-network deductible and out-of-pocket maximum amounts are double the in-network amounts listed below. PEIA offers a Tobacco-free Premium Discount of \$50 per month to family policyholders when all enrolled family members are tobacco-free. To report a change in your tobacco status, call PEIA's Open Enrollment Helpline or go to peia.wv.gov and click on "Manage My Benefits".

Family with Employee Spouse	The Health Plan Plan A	The Health Plan Plan B	The Health Plan POS	PEIA PPB Plan A Premium	PEIA PPB Plan A Annual Deductible	PEIA PPB Plan A Out-of-Pocket Maximum	PEIA PPB Plan B Premium	PEIA PPB Plan B Annual Deductible	PEIA PPB Plan B Out-of-Pocket Maximum	PEIA PPB Plan C Premium (not salary-based)	PEIA PPB Plan C Annual Deductible	PEIA PPB Plan C Out-of-Pocket Maximum	PEIA PPB Plan D Premium	PEIA PPB Plan D Annual Deductible	PEIA PPB Plan D Out-of-Pocket Maximum
\$0 - \$28,100	\$185	\$127	\$141	\$148	\$650	\$3,600	\$91	\$1,450	\$6,000				\$118	\$650	\$3,600
\$28,101 - \$38,100	\$222	\$144	\$158	\$186	\$750	\$4,200	\$108	\$1,450	\$6,000				\$150	\$750	\$4,200
\$38,101 - \$44,100	\$245	\$159	\$173	\$209	\$850	\$4,500	\$123	\$1,450	\$6,000				\$170	\$850	\$4,500
\$44,101 - \$50,100	\$265	\$168	\$182	\$228	\$900	\$5,000	\$133	\$1,450	\$6,000				\$187	\$900	\$5,000
\$50,101 - \$58,100	\$307	\$190	\$204	\$270	\$950	\$5,500	\$155	\$1,950	\$6,000	<b>¢</b> 050	¢2 000	¢5 000	\$222	\$950	\$5,500
\$58,101 - \$70,600	\$361	\$224	\$238	\$325	\$1,200	\$5,600	\$189	\$1,950	\$6,000	\$256	\$2,800	\$5,000	\$269	\$1,200	\$5,600
\$70,601 - \$83,100	\$402	\$255	\$269	\$365	\$1,250	\$5,700	\$219	\$1,950	\$6,000				\$304	\$1,250	\$5,700
\$83,101 - \$108,100	\$497	\$330	\$344	\$460	\$1,300	\$5,800	\$295	\$1,950	\$6,000				\$384	\$1,300	\$5,800
\$108,101 - \$133,100	\$616	\$418	\$432	\$579	\$1,450	\$6,000	\$383	\$1,950	\$6,000				\$486	\$1,450	\$6,000
\$133,101+	\$704	\$487	\$501	\$668	\$1,650	\$6,500	\$451	\$1,950	\$6,000				\$563	\$1,650	\$6,500

You also can view your benefits in the Summary of Benefits and Coverage at **peia.wv.gov**. Call 1-877-676-5573.