



**Greene County**  
**Rates for Active Employees**  
**07/01/2021-06/30/2022**



		MONTHLY	PER PAYCHECK
	<b>Medical – Open Access \$1000 Deductible</b>		
	Employee Only *	\$0.00	\$0.00
	Employee & Spouse	\$690.00	\$345.00
	Employee & Child(ren)	\$493.00	\$246.50
	Family	\$888.00	\$444.00
	<b>Medical – PPO \$1000 Deductible</b>		
 	Employee Only *	\$58.00	\$29.00
	Employee & Spouse	\$832.00	\$416.00
	Employee & Child(ren)	\$611.00	\$305.50
	Family	\$1,052.00	\$526.00
	<b>Medical – Choice Fund 1500 with HSA</b>		
 	Employee Only *	\$0.00	\$0.00
	<b>Individual Health Savings Account Deposit =</b>	<b>\$150.00</b>	<b>\$75.00</b>
	Employee & Spouse	\$212.00	\$106.00
	<b>Family Health Savings Account Deposit =</b>	<b>\$170.00</b>	<b>\$85.00</b>
	Employee & Child(ren)	\$151.00	\$75.50
	<b>Family Health Savings Account Deposit =</b>	<b>\$170.00</b>	<b>\$85.00</b>
	Family	\$385.00	\$192.50
	<b>Family Health Savings Account Deposit =</b>	<b>\$170.00</b>	<b>\$85.00</b>
	<b>Medical- Choice Fund PPO 1500 with HSA</b>		
  	Employee Only *	\$40.00	\$20.00
	<b>Individual Health Savings Account Deposit =</b>	<b>\$150.00</b>	<b>\$75.00</b>
	Employee & Spouse	\$304.00	\$152.00
	<b>Family Health Savings Account Deposit =</b>	<b>\$170.00</b>	<b>\$85.00</b>
	Employee & Child(ren)	\$229.00	\$114.50
	<b>Family Health Savings Account Deposit =</b>	<b>\$170.00</b>	<b>\$85.00</b>
	Family	\$499.00	\$249.50
	<b>Family Health Savings Account Deposit =</b>	<b>\$170.00</b>	<b>\$85.00</b>
	<b>Dental</b>		
	Employee Only	\$0.00	\$0.00
	Employee & Spouse	\$30.00	\$15.00
	Employee & Child(ren)	\$34.00	\$17.00
	Family	\$58.00	\$29.00
	<b>Vision</b>		
	Employee Only	\$8.00	\$4.00
	Employee & Spouse	\$16.00	\$8.00
	Employee & Child(ren)	\$16.00	\$8.00
	Family	\$22.00	\$11.00

\*Completed 2021 health assessment to receive 100% paid employee only medical premium