

**Fairfax County Government
Health, Vision and Dental Insurance Premiums for Employees
January 1, 2012 - December 31, 2012**

	Total Premium Cost	Full Time Premiums			Part Time Premiums*		
		County Share	Employee Monthly Share	Employee Biweekly Share (26 Pay Periods)	County Share	Employee Monthly Share	Employee Biweekly Share (26 Pay Periods)
OAP-High + Vision (managed by CIGNA)							
Individual	\$590.89	\$502.25	\$88.64	\$40.91	\$251.13	\$339.76	\$156.81
2 Party	\$1,152.25	\$864.19	\$288.06	\$132.95	\$432.10	\$720.15	\$332.38
Family	\$1,719.43	\$1,289.57	\$429.86	\$198.40	\$644.79	\$1,074.64	\$495.99
POS + Vision (managed by CareFirst)							
Individual	\$537.95	\$457.26	\$80.69	\$37.24	\$228.63	\$309.32	\$142.76
2 Party	\$1,057.18	\$792.88	\$264.30	\$121.98	\$396.44	\$660.74	\$304.96
Family	\$1,554.78	\$1,166.08	\$388.70	\$179.40	\$583.04	\$971.74	\$448.50
HMO + Vision (managed by Kaiser Permanente)							
Individual	\$489.96	\$416.47	\$73.49	\$33.92	\$208.24	\$281.72	\$130.02
2 Party	\$954.83	\$716.12	\$238.71	\$110.17	\$358.06	\$596.77	\$275.43
Family	\$1,420.58	\$1,065.43	\$355.15	\$163.92	\$532.72	\$887.86	\$409.78
OAP- Low + Vision (managed by CIGNA)							
Individual	\$395.12	\$335.85	\$59.27	\$27.36	\$167.93	\$227.19	\$104.86
2 Party	\$770.49	\$577.87	\$192.62	\$88.90	\$288.94	\$481.55	\$222.25
Family	\$1,149.81	\$862.36	\$287.45	\$132.67	\$431.18	\$718.63	\$331.68
Delta Dental							
Individual	\$38.24	\$19.12	\$19.12	\$8.82	\$9.56	\$28.68	\$13.24
2 Party	\$72.26	\$36.13	\$36.13	\$16.68	\$18.07	\$54.19	\$25.01
Family	\$119.10	\$59.55	\$59.55	\$27.48	\$29.78	\$89.32	\$41.22

Part-time premiums apply to: benefit- eligible employees (merit) hired after July 3, 2009, scheduled to work 30 hours or less per week and all Status B employees.