## Southampton County Public Schools Health Insurance Rates Effective 7/1/2024

Monthly ER (Emp	· Comprehens	ution)								
	Key Advantage \$250 Plan				Key Advantage \$500 Plan			Sentara Health Vantage HMO (Formerly Optima)		
	Rate	ER	EE	Rate	ER	EE	Rate	ER	EE	
Single	1,354	1,084	270	1,200	1,084	116	842	842	0	
Dual	2,505	1,315	1,190	2,220	1,315	905	1,557	1,315	242	
Family	3,656	1,545	2,111	3,240	1,545	1,695	2,254	1,545	709	
	+ Basic Denta lly Rates	al								
Single	1,337	1,084	253	1,183	1,084	99				
Dual	2,473	1,315	1,158	2,189	1,315	874				
Family	3,610	1,545	2,065	3,194	1,545	1,649				