



**2022 RF Employee Biweekly Health Insurance Rates**  
**Based on 27 bi-weekly pay periods in 2021**

PLAN		COST
Empire Traditional PPO	Individual	\$74.41
	EE & Spouse	\$235.06
	EE & Children	\$189.49
	Family	\$371.06
Empire Deductible PPO	Individual	\$32.86
	EE & Spouse	\$151.94
	EE & Children	\$114.70
	Family	\$246.53
MVP	Individual	\$68.35
	EE & Spouse	\$255.61
	EE & Children	\$191.27
	Family	\$285.64
DENTAL	Individual	\$1.59
	EE & Spouse	\$7.03
	EE & Children	\$7.03
	Family	\$7.03
VISION	Individual	\$0
	EE & Spouse	\$0
	EE & Children	\$0
	Family	\$0
VISION PLUS	Individual	\$4.85
	EE & Spouse	\$11.31
	EE & Children	\$11.31
	Family	\$11.31