



PEEHIP PREMIUM RATES

PEEHIP Hospital Medical Plan & VIVA Health Plan (Base Rate) – Active Member

Individual	\$30.00
Individual plus non-spouse dependents (no-spouse)	\$207.00
Individual plus spouse only (no other dependents)	\$282.00
Individual plus spouse plus other dependents	\$307.00

Optional Coverage Plan

Cancer, Indemnity, and Vision	Individual of Family	\$38.00 (cost per plan)
Dental	Individual	\$38.00
Dental	Family	\$50.00

*If you waive hospital/medical insurance, you may select 2 of the 4 optional plans and they will be free. They are Dental, Cancer, Indemnity, and Vision with Southland.

PEEHIP will mail enrollment information to your home or you may apply online through Members Online Services. You will need to make the effective date of your insurance, the first day of your employment or the first day of the month following your employment date. You have only 30 days to sign up for insurance benefits. After that, you may enroll, make changes or cancel coverage once a year during July and August with an October 1st effective date, unless it is a qualifying life event.