

Southampton County Public Schools
Health Insurance Rates
Effective 7/1/2025

Health + Comprehensive Dental Monthly Rates ER (Employer Contribution) EE (Employee's Cost)									
	Key Advantage \$250 Plan			Key Advantage \$500 Plan			Sentara Health Vantage HMO		
	Rate	ER	EE	Rate	ER	EE	Rate	ER	EE
Single	1,354	1,084	270	1,200	1,084	116	1,022	1,022	0
Dual	2,505	1,315	1,190	2,220	1,315	905	1,888	1,646	242
Family	3,656	1,545	2,111	3,240	1,545	1,695	2,734	2,025	709
Health + Basic Dental Monthly Rates									
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			