



2023 Team Member Contributions (per biweekly pay period)

Medical

Plan	Team Member Only	Team Member + Spouse	Team Member + Child(ren)	Family
HSA HDP	\$48	\$92	\$78	\$120
PPO	\$71	\$204	\$186	\$289

Plan (Married Inova Couples)	Team Member + Spouse	Family
HSA HDP	\$76	\$96
PPO	\$111	\$211

Dental

Plan	Team Member Only	Team Member + Spouse	Team Member + Child(ren)	Family
High	\$8	\$26	\$24	\$40
DMO	\$3	\$5	\$5	\$10

Plan (Married Inova Couples)	Team Member + Spouse	Family
High	\$14	\$29
DMO	\$4	\$7

Vision

Plan	Team Member Only	Team Member + Spouse	Team Member + Child(ren)	Family
Core	\$0	\$0	\$0	\$0
Buy-Up	\$3.25	\$6.98	\$6.55	\$11.16
Buy-Up Plus	\$5.38	\$11.55	\$10.83	\$18.46

- Deductions are taken over 26 pay periods on a pre-tax basis for medical, dental and vision coverage.
- Medical, dental and vision coverage is offered to full-time team members (60+ hours/pay period) and part-time team members (40-59 hours/pay period)
- Contact the Inova Benefits Center at 1-877-466-8201 to request the Married Inova Couples premium rate.