Issue Analysis Form

Date: April 12, 2022

Health, Vision & Dental

Insurance – FY2022-23

Lead Department(s): Finance/Human Resources

Contact Person(s): Betsy Drewry & Corrie Hurt

VIRGINIA

Description and Current Status

Dental Insurance:

The 2022-23 renewal from Delta Dental was **proposed at the same rates as in FY2021-22 (no increase)** for active employees and retirees. Staff and our benefit consultant recommend renewal with Delta Dental on a fully insured basis. Rate sheet is attached for board review – See page 3 for active employee rates; page 5 for retiree rates.

Vision Insurance:

The 2022-23 renewal from Anthem Blue View Vision was proposed at the same rates as in FY2021-22 (no increase) for active employees or retirees. Staff recommends renewal with Anthem Blue View Vision. Rate sheet is attached for board review – See page 3 for active employee rates; page 5 for retiree rates.

Health Insurance:

A full RFP was issued and proposals were received on March 18, 2022. Staff and our benefit consultant recommend continuing with Anthem on a self-insured basis, so this will be considered a renewal, rather than an award of contract. The 2022-23 renewal from Anthem was proposed with no increase in the employer or employee share/portion of premiums for the County. Retirees will continue to pay 100% of his/her premiums. Staff recommends renewal with Anthem and to separate health insurance from the School system. Rate sheet is attached for board review – See page 4 for active employees and page 6 for retiree rates (no increase in employer contribution over 2021-22 for active employees). Retiree rates are shown on Page 6; retirees bear 100% of the cost of health insurance premiums, and there is no proposed increase in premiums for retirees for 2022-23.

The employer contributions to the Health Savings Account (H S A) will remain the same as in FY2021-22. \$1,000 Employee Only; \$1,250 Employee + 1; \$1,500 for Employee + Children / Family.

The health insurance renewal also continues two targeted wellness incentives for FY2022-23 that were started in 2019-20 (Waist Incentive and HealthMapRx) and a new wellness incentive for hypertension (Blood pressure monitoring). The additional wellness incentive will have minimal financial impacts and can be absorbed in the total budgeted cost for health insurance.

Requested Board Action: Renew with Delta Dental with no increase Renew with Anthem - Blue View Vision with no increase Renew with Anthem for health insurance separating from employer share of premium for active employees or ret A contribution. Proposed rate sheets and draft resolution for adoption a	m the scho irees, and	no increase in the H 5
Government Path		
Does this require IDA action? Does this require BZA action? Does This require Planning Commission Action? Does this require Board of Supervisors action? Does this require a public hearing? If so, before what date?	☐ Yes	☒ No☒ No☒ No☒ No☒ No☐ No
Fiscal Impact Statement	HE LINE	
There is no increase in fiscal impact to the County for the renewal based on premiums being the same for 2022-2 and retirees pay 100% of the premium for dental insurabuy-up insurance (Anthem Blue View). There is no incomplete the dental insurance of vision buy-up insurance for 2022-25	23 as in 20 ince (Delta rease prop)21-22. Employees a Dental) and for vision
County Impact	-11 of 10	
Approval of the renewals will allow Human Resources to enrollment communications.	o move fo	rward with open
Notes	10 10 15	

ACTIVE EMPLOYEES FY22 TO FY23 CHANGE Prince George County Dental Rates FY/23 Effective June 2022 for July 1, 2022 coverage (monthly rates) ACTIVE EMPLOYEES - 0% Increase; RETIREES - 0% Increase **Delta Low Tier Dental Plan** Employer Total Health Employee **Premium** Contribution Premium Contribution % Change Change Amount Amount Cost 28.98 0.00% \$ 28.98 **Employee Only** 0.00% \$ \$ \$ 62.32 62.32 Employee/Child 0.00% \$ \$ 62.32 \$ 62.32 \$ Employee/Children \$ 0.00% \$ 59.04 \$ \$ 59.04 Employee/Spouse \$ 0.00% \$ \$ 68.74 -68.74 \$ Employee/Family Delta High Tier Dental Plan Total Health Employer **Employee Premium** Contribution Contribution Premium % Change Change Cost Amount Amount 0.00% \$ 35.56 \$ 35.56 **Employee Only** 0.00% \$ \$ 79.86 \$ \$ 79.86 Employee/Child 0.00% \$ \$ \$ \$ 79.86 Employee/Children 79.86 0.00% \$ \$ 71.12 \$ \$ 71.12 Employee/Spouse 0.00% \$ \$ 100.53 \$ 100.53 Employee/Family **Prince George County Vision Rates FY/23 NO INCREASE Blue View Vision Buy-Up (Voluntary)** Total Health Employer **Employee Premium** Premium Contribution Contribution % Change Change Cost Amount **Amount** 0.00% \$ \$ 5.91 **Employee Only** 5.91 0.00% \$ 10.34 \$ \$ Employee/Child \$ 10.34 \$ 0.00% \$ \$ 11.81 \$ 11.81 Employee/Children \$ 0.00% \$ 10.34 \$ 10.34 Employee/Spouse \$ 0.00% \$ \$ \$ 17.18 17.18 Employee/Family

PROPOSE 10% INCREASE IN E		HEALTH RAT		SEPARATING FROM SCHOOLS					
	Anthem P	IN 30			CONTRIBU	TION %	\$1	NCREAS	E
	Employee Contribution Amount	Employer Contribution Amount	Total Health Premium Cost		EE	ER	EE INCREAS		NCREASE
Employee Only	\$ 40.00	\$ 818.19	\$ 858.19		4.66%	95.34%	•	\$	5
Employee/Child	\$ 215.00	\$ 859.23	\$ 1,074.23		20.01%	79.99%		\$	*
Employee/Children	\$ 425.00	\$ 898.98	\$ 1,323.98		32.10%	67.90%	•	\$	*
Employee/Spouse	\$ 500.00	\$ 941.55	\$ 1,441.55		34.68%	65.32%		\$	*
Employee/Family	\$ 710.00	\$ 967.55	\$ 1,677.55		42.32%	57.68% 73.24 %		\$	7
Anthem High I	Deductible H	lealth Plan (w	ith HSA)						
Anthem High I	Employee Contribution Amount	Employer	Total Health Premium Cost	Annual Employer	EE	ER	EE INCREAS	E ERI	ncreasi
	Employee Contribution	Employer Contribution	Total Health		EE 0.00%	100.00%	\$ -	\$	NCREASI -
Employee Only	Employee Contribution Amount	Employer Contribution Amount \$ 779.48	Total Health Premium Cost	HSA Contribution		100.00% 89.47%	\$ - \$ -	\$	
Employee Only Employee/Child	Employee Contribution Amount	Employer Contribution Amount \$ 779.48 \$ 917.30	Total Health Premium Cost \$ 779.48	S 1,000.00	0.00% 10.53% 16.44%	100.00% 89.47% 83.56%	\$ - \$ - \$ -	\$ \$ \$	
Anthem High I Employee Only Employee/Child Employee/Children Employee/Spouse	Employee Contribution Amount \$ - \$ 108.00	Employer Contribution Amount \$ 779.48 \$ 917.30 \$ \$1,082.99	Total Health Premium Cost \$ 779.48 \$ 1,025.30	HSA Contribution \$ 1,000.00 \$ 1,250.00	0.00% 10.53% 16.44% 17.65%	100.00% 89.47% 83.56% 82.35%	\$ - \$ - \$ -	\$ \$ \$ \$	NCREASE
Employee Only Employee/Child Employee/Children Employee/Spouse	Employee Contribution Amount \$ - \$ 108.00 \$ 213.00	Employer Contribution Amount \$ 779.48 \$ 917.30 \$ 1,082.99 \$ \$1,166.55	Total Health Premium Cost \$ 779.48 \$ 1,025.30 \$ 1,295.99	HSA Contribution	0.00% 10.53% 16.44% 17.65% 21.21%	100.00% 89.47% 83.56% 82.35% 78.79%	\$ - \$ - \$ - \$ -	\$ \$ \$	
Employee Only Employee/Child Employee/Children	Employee Contribution Amount \$ = \$ 108.00 \$ 213.00 \$ 250.00	Employer Contribution Amount \$ 779.48 \$ 917.30 \$ 1,082.99 \$ \$1,166.55	Total Health Premium Cost \$ 779.48 \$ 1,025.30 \$ 1,295.99 \$ 1,416.55	HSA Contribution \$ 1,000.00 \$ 1,250.00 \$ 1,500.00 \$ 1,250.00 \$ 1,250.00	0.00% 10.53% 16.44% 17.65%	100.00% 89.47% 83.56% 82.35%	\$ - \$ - \$ - \$ -	\$ \$ \$ \$	
Employee Only Employee/Child Employee/Children Employee/Spouse	Employee Contribution Amount \$ = \$ 108.00 \$ 213.00 \$ 250.00	Employer Contribution Amount \$ 779.48 \$ 917.30 \$ 1,082.99 \$ \$1,166.55	Total Health Premium Cost \$ 779.48 \$ 1,025.30 \$ 1,295.99 \$ 1,416.55 \$ 1,674.03	HSA Contribution	0.00% 10.53% 16.44% 17.65% 21.21% 13.16%	100.00% 89.47% 83.56% 82.35% 78.79%	\$ - \$ - \$ - \$ -	\$ \$ \$ \$	
Employee Only Employee/Child Employee/Children Employee/Spouse	Employee Contribution Amount \$ = \$ 108.00 \$ 213.00 \$ 250.00	Employer Contribution Amount \$ 779.48 \$ 917.30 \$ 1,082.99 \$ \$1,166.55	Total Health Premium Cost \$ 779.48 \$ 1,025.30 \$ 1,295.99 \$ 1,416.55 \$ 1,674.03	HSA Contribution	0.00% 10.53% 16.44% 17.65% 21.21% 13.16%	100.00% 89.47% 83.56% 82.35% 78.79% 86.84%	\$ - \$ - \$ - \$ -	\$ \$ \$ \$	

RETIREES

Prince George County Dental Rates FY/23 Effective June 2022 for July 1, 2022 coverage (monthly rates)

FY22 TO FY23 CHANGE

RETIREES - 0% Increase

Del	ta Lo	w Tier D	ental	Plan			
	En	nployee	En	nployer	Total Health		
	Contribution		Con	tri bution	Premium		
	A	mount	Α	mount	Cost		
Employee Only	\$	30.50	\$	-	\$	30.50	
Employee/Child	\$	65.56	\$	~	\$	65.56	
Employee/Children	\$	65.56	\$	(#)	\$	65.56	
Employee/Spouse	\$	62.12	\$	8.	\$	62.12	
Employee/Family	\$	72.32	\$	· *	\$	72.32	

•	% Change
¥	0.00%
*	0.00%
3	0.00%
15	0.00%
4	0.00%
	mium ange - - - -

Delt	ta Hi	igh Tier [)ent	al Plan	N.II		
	Eı	Employee Contribution		Employer	Total Health Premium		
	ြင္ပ			ontri bution			
	1	Amount		Amount		Cost	
Employee Only	\$	37.42	\$	-	\$	37.42	
Employee/Child	\$	84.02	\$		\$	84.02	
Employee/Children	\$	84.02	\$	2	\$	84.02	
Employee/Spouse	\$	74.82	\$		\$	74.82	
Employee/Family	\$	105.76	\$		\$	105.76	

' ' '	mium ange	% Change
\$	e e	0.00%
\$		0.00%
\$	(+)	0.00%
\$:	0.00%
\$	120	0.00%

Prince George County Vision Rates FY/23

NO CHANGE

Blue Vier	w Vi	sion Buy	-Up	(Voluntary)		ALC: NEW YORK	
	Employee			Employer	Total Health Premium		
	Con	Contribution		ontribution			
	A	mount		Amount	Cost		
Employee Only	\$	5.91	\$		\$	5.91	
Employee/Child	\$	10.34	\$	(5.8	\$	10.34	
Employee/Children	\$	11.81	\$		\$	11.81	
Employee/Spouse	\$	10.34	\$	Fav	\$	10.34	
Employee/Family	\$	17.18	\$		\$	17.18	

Premiu	m	
Change	•	% Change
\$ -		0.00%
\$ -		0.00%
\$ -		0.00%
\$ -		0.00%
\$ -		0.00%

	INCREAS	SE .								
IN	ICREASE PRO	POSE	D		1			-		
	Anthem Pl	N 30						\$ INC	REASE	
	Retiree Contribution Amount	Contr	oloyer ibution lount		tal Health mium Cost				TIREE REASE	% Increase
Employee Only	\$ 858.19	\$		\$	858.19			\$	=	0.00%
Employee/Child	\$1,074.23	\$	5 0	\$	1,074.23			\$	-	0.00%
Employee/Children	\$1,323.98	\$	-	\$	1,323.98			\$).e.	0.00%
Employee/Spouse	\$1,441.55	\$; =);	\$	1,441.55			\$	~	0.00%
Employee/Family	\$1,677.55	\$	*	\$	1,677.55			\$)*.	0.00%
Anthem High D	eductible He	ealth	Plan (w	ith H	ISA)					
	Retiree Contribution Amount	Cont	ployer ribution nount		tal Health mium Cost	An	nual Employer HSA Contribution		TIREE REASE	
Employee Only	\$ 779.48	\$	-	\$	779.48	\$		\$	-	0.00%
Employee/Child	\$1,025.30	\$		\$	1,025.30	\$		\$	2	0.00%
Employee/Children	\$1,295.99	\$	9.	\$	1,295.99	\$: -	\$		0.00%
Employee/Spouse	\$1,416.55	\$	-	\$	1,416.55	\$	9.5	\$		0.00%
Employee/Family	\$1,674.03	\$		\$	1,674.03	\$	-	Ś	2	0.00%

	ACTIVE EMP		v/22	EV22 TO EV	22 CHANGE	
		Dental Rates F		FY22 TO FY	25 CHANGE	
Effective June 2022 fo						
ACTIVE EMPLOYEES	- 0% Increa	se; RETIREES - 0	% Increase			
Delt	ta Low Tier D					
	Employee	Employer	Total Health	Premium		
	Contribution Amount	Contribution Amount	Premium Cost	Change	% Change	
			\$ 28.98	\$ -	0.00%	
Employee Only	\$ 28.98	\$ -		\$ -	0.00%	
Employee/Child	\$ 62.32	\$ -	\$ 62.32			
Employee/Children	\$ 62.32	\$ -	\$ 62.32	\$ -	0.00%	
Employee/Spouse	\$ 59.04	\$ -	\$ 59.04	\$ -	0.00%	
Employee/Family	\$ 68.74	\$ -	\$ 68.74	\$ -	0.00%	
Delt	a High Tier I	Dental Plan				
	Employee	Employer	Total Health	Premium		
	Contribution	Contribution	Premium	1	0/ Change	
	Amount	Amount	Cost	Change	% Change	
Employee Only	\$ 35.56	\$ -	\$ 35.56	\$ -	0.00%	
Employee/Child	\$ 79.86	\$ -	\$ 79.86	\$ -	0.00%	
Employee/Children	\$ 79.86	\$ =	\$ 79.86	\$ -	0.00%	
Employee/Spouse	\$ 71.12	\$ -	\$ 71.12	\$ -	0.00%	
Employee/Family	\$ 100.53	\$ -	\$ 100.53	\$ -	0.00%	
Prince Geor		Vision Rates F	Y/23			
	NO INCRI		Tal VETSALL ST. ST.			
Blue Vie		/-Up (Voluntar) Employer	Total Health			
	Employee Contribution	Contribution	Premium	Premium		
	Amount	Amount	Cost	Change	% Change	
Employee Only	\$ 5.91	\$ -	\$ 5.91	\$ -	0.009	
Employee/Child	\$ 10.34	\$ -	\$ 10.34	\$ -	0.009	
Employee/Children	\$ 11.81	\$ -	\$ 11.81	\$ -	0.009	
Employee/Spouse	\$ 10.34	\$ -	\$ 10.34	\$ -	0.009	
			\$ 17.18	\$ -	0.009	
Employee/Family	\$ 17.18	\$ -	γ 1/.10	3 -	0.00/	

ACTIVE EMPLOYEES

PROPOSE	D FY22-23 H	HEALTH RAT	res	SEPARATING FROM SCHOOLS						
10% INCREASE IN E	MPLOYER CO	NTRIBUTION	APPROVED							
	Anthem PI	N 30			CONTRIBU	TION %	-	\$ IN	CREASE	
	Employee Contribution Amount	Employer Contribution Amount	Total Health Premium Cost		EE	ER	EE INC	CREASE		CREASE
Employee Only	\$ 40.00	\$ 818.19	\$ 858.19		4.66%	95.34%	\$	Ħ	\$	
Employee/Child	\$ 215.00	\$ 859.23	\$ 1,074.23		20.01%	79.99%	\$		\$	
Employee/Children	\$ 425.00	\$ 898.98	\$ 1,323.98		32.10%	67.90%	\$	-	\$	
Employee/Spouse	\$ 500.00	\$ 941.55	\$ 1,441.55		34.68%	65.32%	\$	2	\$	-
Employee/Family	\$ 710.00	\$ 967.55	\$ 1,677.55		42.32%	57.68%	\$	-	\$	2
THE STATE OF THE S					26.76%	73.24%				
					20.70%	/3.24/0				
Anthem High D	eductible He	ealth Plan (w	rith HSA)		26.76%	/3.24/0				
Anthem High D	Employee Contribution Amount	Employer Contribution Amount	Total Health Premium Cost	Annual Employer HSA Contribution	20.76% EE	73.2476 ER	EE IN	CREASE		CREASE
	Employee Contribution	Employer Contribution	Total Health					CREASE	\$	CREASE
Employee Only	Employee Contribution Amount	Employer Contribution Amount	Total Health Premium Cost	HSA Contribution	EE	ER	\$	CREASE	\$ \$	CREASE
Employee Only Employee/Child	Employee Contribution Amount	Employer Contribution Amount \$ 779.48	Total Health Premium Cost \$ 779.48	HSA Contribution \$ 1,000.00	EE 0.00%	ER 100.00%	\$ \$	CREASE	\$ \$ \$	
Employee Only Employee/Child Employee/Children	Employee Contribution Amount \$ - \$ 108.00	Employer Contribution Amount \$ 779.48 \$ 917.30	Total Health Premium Cost \$ 779.48 \$ 1,025.30	HSA Contribution \$ 1,000.00 \$ 1,250.00	EE 0.00% 10.53%	ER 100.00% 89.47%	\$ \$ \$		\$ \$ \$	
Employee Only Employee/Child Employee/Children Employee/Spouse Employee/Family	Employee Contribution Amount \$ - \$ 108.00 \$ 213.00	Employer Contribution Amount \$ 779.48 \$ 917.30 \$1,082.99	Total Health Premium Cost \$ 779.48 \$ 1,025.30 \$ 1,295.99	HSA Contribution \$ 1,000.00 \$ 1,250.00 \$ 1,500.00	0.00% 10.53% 16.44%	ER 100.00% 89.47% 83.56%	\$ \$ \$ \$		\$ \$ \$	# 1 **
Employee Only Employee/Child Employee/Children Employee/Spouse	Employee Contribution Amount \$ - \$ 108.00 \$ 213.00 \$ 250.00	Employer Contribution Amount \$ 779.48 \$ 917.30 \$1,082.99 \$1,166.55	Total Health Premium Cost \$ 779.48 \$ 1,025.30 \$ 1,295.99 \$ 1,416.55	HSA Contribution	0.00% 10.53% 16.44% 17.65%	ER 100.00% 89.47% 83.56% 82.35%	\$ \$ \$ \$	*	\$ \$ \$	
Employee Only Employee/Child Employee/Children Employee/Spouse	Employee Contribution Amount \$ - \$ 108.00 \$ 213.00 \$ 250.00	Employer Contribution Amount \$ 779.48 \$ 917.30 \$1,082.99 \$1,166.55	Total Health Premium Cost \$ 779.48 \$ 1,025.30 \$ 1,295.99 \$ 1,416.55 \$ 1,674.03	SA Contribution \$ 1,000.00 \$ 1,250.00 \$ 1,250.00 \$ 1,250.00 \$ 1,500.00 \$ 1,500.00	0.00% 10.53% 16.44% 17.65% 21.21% 13.16%	ER 100.00% 89.47% 83.56% 82.35% 78.79%	\$ \$ \$ \$	*	\$ \$ \$	(a)

	F	RETIRE	ES										
Prince Georg	ge Co	unty D	enta	al Rates F	Y/23		FY22	TO FY	23 CHANGE				
Effective June 2022 f	or Jul	y 1, 202	2 cov	erage (mo	nthly	rates)							
		ES - 0%											
Del	ta Lov	w Tier D	enta	l Plan	N L	W. N. 19-1							
	Employee Employer Total Health												
	Contribution		Contribution		Contribution		Cor	tribution	Pre	emium	1	nium	
	Amount Cost				Cost		ange	% Change					
Employee Only	\$	30.50	\$		\$	30.50	\$		0.00%				
Employee/Child	\$	65.56	\$		\$	65.56	\$	3	0.00%				
Employee/Children	\$	65.56	\$,	\$	65.56	\$	ä	0.00%				
Employee/Spouse	\$	62.12	\$	-	\$	62.12	\$	¥	0.00%				
Employee/Family	Ś	72.32	\$	-	Ś	72.32	\$	-	0.00%				
Linployee/Tulliny	-	71.01	¥		1								
Del	ta Hid	h Tier C)ents	l Dian									
Dei		ployee		mployer	Tota	al Health							
		ribution		ntribution	1	emium	Prei	mium					
		nount	, ,	Amount		Cost	Ch	ange	% Change				
Employee Only	\$	37.42	\$		\$	37.42	\$	3)	0.00%				
Employee/Child	\$	84.02	\$.	\$	84.02	\$	<u>=</u> \	0.00%				
Employee/Children	\$	84.02	\$	-	\$	84.02	\$	***	0.00%				
Employee/Spouse	\$	74.82	\$		\$	74.82	\$	147	0.00%				
Employee/Family	_	105.76	\$		\$	105.76	\$	# 0	0.00%				
Elliployee/ rathing	12	105.70	7		1 +	200170							
Daines Cook			Visio	n Dates E	v/22		-						
Prince Geor	_			II Kales F	1/23		-						
		O CHAI			1 - 10	H27311							
Blue Vie				Voluntary		al Health	-						
		ployee tribution		mployer ntribution		remium	Pre	mium					
		mount		Amount	1	Cost	Ch	ange	% Change				
Employee Only	\$	5.91	\$	-	\$	5.91	\$	•	0.009				
Employee/Child	\$	10.34	\$	-	\$	10.34	\$:=:	0.009				
	+	11.81	\$		\$	11.81	\$		0.009				
Employee/Children	\$		\$		\$	10.34	\$	3 -	0.009				
Employee/Spouse		10.34	_			17.18	\$		0.009				
Employee/Family	\$	17.18	\$	1744	\$	17.18	13		0.007				

	INCREAS						
IN THE RESERVE TO THE	ICREASE PRO	POSED					
Anthem PIN 30					\$ INCREASE		
	Retiree Contribution Amount	Employer Contribution Amount	Total Health Premium Cost		RETIREE INCREASE		% Increase
Employee Only	\$ 858.19	\$ -	\$ 858.19		\$	3	0.00%
Employee/Child	\$1,074.23	\$ -	\$ 1,074.23		\$	-	0.00%
Employee/Children	\$1,323.98	\$ -	\$ 1,323.98		\$		0.00%
Employee/Spouse	\$1,441.55	\$ -	\$ 1,441.55		\$	-	0.00%
Employee/Family	\$1,677.55	\$ -	\$ 1,677.55		\$	32	0.00%
Anthem High D	eductible He	ealth Plan (w	rith HSA)				
	Retiree Contribution Amount	Employer Contribution Amount	Total Health Premium Cost	Annual Employer HSA Contribution	RETIREE INCREASE		
Employee Only	\$ 779.48	\$ -	\$ 779.48	\$ -	\$	-	0.00%
Employee/Child	\$1,025.30	\$ -	\$ 1,025.30	\$ -	\$		0.00%
Employee/Children	\$1,295.99	\$ -	\$ 1,295.99	\$ -	\$	-	0.00%
Employee/Spouse	\$1,416.55	\$ -	\$ 1,416.55	\$ =:	\$	-	0.00%
Employee/Family	\$1,674.03	\$ -	\$ 1,674.03	\$ -	\$	-	0.00%
				NO EMPLOYER H S A CONTRIBUTION FOR RETIREES			

Board of Supervisors County of Prince George, Virginia

Resolution

At a regular meeting of the Board of Supervisors of the County of Prince George
held in the Boardroom, Third Floor, County Administration Building, 6602 Courts Drive,
Prince George, Virginia this 12 th day of April, 2022:
Present: Vote:
Marlene J. Waymack, Chair
Donald R. Hunter, Vice-Chair
Floyd M. Brown, Jr.,
Alan R. Carmichael
T. J. Webb
A-3
On motion of, seconded by, which carried
unanimously, the following Resolution was adopted:
RESOLUTION; APPROVAL OF RECOMMENDED FY2023 HEALTH, DENTAL AND VISION INSURANCE RENEWALS WITH RECOMMENDED RATES AS ATTACHED.
BE IT RESOLVED That the Board of Supervisors of the County of Prince George this 12 th day of April, 2022, does hereby authorize renewing for FY2023
Dental Insurance with Delta Dental of Virginia with no increase to active employees or retirees;
Vision Insurance with Blue View Vision with no increase to active employees or retirees;
Health Insurance with Anthem with no increase to active employees or retirees and separating health insurance from the school division.
BE IT FURTHER RESOLVED That the Board of Supervisors of the County of Prince George this 12 th day of April, 2022, does hereby approve recommended FY2023 rates as provided and attached.
A Copy Teste:
Jeffrey D. Stoke Interim County Administrator