

**Holston Conference**  
**EFFECTIVE JANUARY 1, 2017**  
**2017 Insurance Rates**

**Premium Plan - BCBST Network "P" (10% Surcharge)**

**REGULAR PLAN MINISTERS**

	Individual Coverage		Employee + 1		Family Coverage	
Direct Invoice	\$	686.00	\$	686.00	\$	686.00
Minister	\$	208.00	\$	454.00	\$	628.00
<b>Total</b>	<b>\$</b>	<b>894.00</b>	<b>\$</b>	<b>1,140.00</b>	<b>\$</b>	<b>1,314.00</b>
VANCO Discount	\$	(14.00)	\$	(14.00)	\$	(14.00)

**H.S.A. MINISTERS**

	Individual Coverage		Employee + 1		Family Coverage	
Direct Invoice	\$	686.00	\$	686.00	\$	686.00
Minister	\$	118.00	\$	123.00	\$	169.00
<b>Total</b>	<b>\$</b>	<b>804.00</b>	<b>\$</b>	<b>809.00</b>	<b>\$</b>	<b>855.00</b>
<small>*\$600/year contributed to H.S.A. account    **\$1,200/ year deposited to H.S.A account    ***\$1,200/ year deposited to H.S.A account</small>						
VANCO Discount	\$	(14.00)	\$	(14.00)	\$	(14.00)

**REGULAR PLAN LAY EMPLOYEES**

	Individual Coverage		Employee + 1		Family Coverage	
Employer	\$	401.00	\$	884.00	\$	1,255.00
Claimant	\$	208.00	\$	454.00	\$	628.00
<b>Total</b>	<b>\$</b>	<b>609.00</b>	<b>\$</b>	<b>1,338.00</b>	<b>\$</b>	<b>1,883.00</b>
VANCO Discount	\$	(7.00)	\$	(14.00)	\$	(14.00)

**H.S.A. LAY EMPLOYEES**

	Individual Coverage		Employee + 1		Family Coverage	
Employer	\$	401.00	\$	884.00	\$	1,255.00
Claimant	\$	118.00	\$	123.00	\$	169.00
<b>Total</b>	<b>\$</b>	<b>519.00</b>	<b>\$</b>	<b>1,007.00</b>	<b>\$</b>	<b>1,424.00</b>
<small>*\$600/year contributed to H.S.A. account    **\$1,200/ year deposited to H.S.A account    ***\$1,200/ year deposited to H.S.A account</small>						
VANCO Discount	\$	(7.00)	\$	(14.00)	\$	(14.00)

**REGULAR PLAN EARLY RETIREES-Minister**

	Individual Coverage		Employee + 1		Family Coverage	
Premium	\$	668.00	\$	1,452.00	\$	2,048.00
VANCO Discount	\$	(7.00)	\$	(14.00)	\$	(14.00)

***Only TN Providers differentiate between Network "S" and Network "P". If you utilize a TN Provider, Assess each Network to determine which best meets your needs.***