

OFFICE OF GROUP BENEFITS ACT 322 & ACT 992 RETIREE PREMIUM RATES (75% Participation Rate)

Effective August 1, 2013

**\ <u>\(\) \(</u>	PPO Administered by Blue Cross			HMO Administered by Blue Cross			CDHP with HSA Administered by Blue Cross			Regions 5, 6, 7, 8 & 9 Medical Home HMO Insured by Vantage Health Plan		
	Adilli	пізтегеа ру війс	Cross	Adii	ammistered by Blue Cross Adm			пізтегеа ву вій	ie Cross	insured by Vantage Health Plan		
	State	Employee	Tatal	State	Employee	Tatal		Employee	Tatal		Employee	Tatal
ACTIVE EMPLOYEE*	Share	Share	Total	Share	Share	Total	Share	Share	Total	Share	Share	Total
<u></u>												
SINGLE	_	_	_	_	_	_	_	_	_	_	_	_
WITH SPOUSE	_	_	_	_	_	_	_	_	_	_	_	_
WITH CHILDREN	_	_	_	_	_	_	_	_	_	_	_	_
FAMILY	_	_	_	_	_	_	_	_	_	_	_	_
RETIREE WITHOUT MEDICARI	E & RE-EMP	LOYED RETI	REE									
SINGLE	424.30	628.22	1052.52	400.86	596.66	997.52	N/A	N/A	N/A	404.60	579.96	984.56
WITH SPOUSE	742.26	1116.30	1858.56	701.18	1060.14	1761.32	N/A	N/A	N/A	702.74	1024.62	1727.36
WITH CHILDREN	486.42	685.94	1172.36	459.52	651.64	1111.16	N/A	N/A	N/A	462.96	632.12	1095.08
FAMILY	775.10	1074.42	1849.52	732.18	1020.70	1752.88	N/A	N/A	N/A	733.50	985.54	1719.04
RETIREE WITH 1 MEDICARE												
SINGLE	256.72	85.56	342.28	247.50	82.50	330.00	N/A	N/A	N/A	249.24	81.12	330.36
WITH SPOUSE	742.26	522.34	1264.60	701.18	504.90	1206.08	N/A	N/A	N/A	702.74	477.30	1180.04
WITH CHILDREN	444.30	148.10	592.40	425.76	141.92	567.68	N/A	N/A	N/A	423.06	137.70	560.76
FAMILY	775.10	909.86	1684.96	732.18	873.18	1605.36	N/A	N/A	N/A	733.50	833.86	1567.36
RETIREE WITH 2 MEDICARE												
WITH SPOUSE	461.44	153.80	615.24	443.68	147.88	591.56	N/A	N/A	N/A	438.82	142.82	581.64
FAMILY	571.32	190.44	761.76	549.30	183.10	732.40	N/A N/A	N/A N/A	N/A N/A	540.66	175.98	716.64
FAMILT	3/1.32	190.44	701.70	549.50	103.10	732.40	IN/A	IN/A	IN/A	340.00	175.96	7 10.04
C.O.B.R.A.*												
SINGLE	_	_	_	_	_	_	_	_	_	_	_	_
WITH SPOUSE	_	_	_	_	_	_	_	_	_	_	_	_
WITH CHILDREN	_	_	_	_	_	_	_	_	_	_	_	_
FAMILY	_	_	_	_	_	_	_	_	_	_	_	_
DISABILITY C.O.B.R.A.*												
SINGLE												
WITH SPOUSE	_	_	_	_	_	_	_	_	_	_	_	_
WITH CHILDREN	_	_	_	_	_	_	_	_	_	_	_	
FAMILY	_	_	_	_	_	_	_	_	_	_	_	_
FAIVIILT	_	_	_	_	_	_	_	_	_	_	_	_

NOTE: 1) The breakdown between State Share and Employee Share may not be accurate for certain school board employees due to local funding that affects agency funding that affects agency contributions. Total premium columns are correct for all agencies.

²⁾ All plan members who retired on or after July 1, 1997, must have Medicare Parts A and B to qualify for reduced premium rates.

^{*} These rates do not apply to active employees or COBRA participants.