



OFFICE OF GROUP BENEFITS

**OFFICIAL SCHEDULE OF PREMIUM RATES**

*Rates for Medicare Advantage plans effective January 1, 2017 (75% participation rate)*

*For a complete list of rates at all participation levels please visit [info.groupbenefits.org](http://info.groupbenefits.org). School Board employee contributions may be different.*

	Peoples Health HMO-POS Insured by Peoples Health			Vantage Premium HMO-POS Insured by Vantage Health Plan			Vantage HMO-POS Insured by Vantage Health Plan			Vantage Zero Premium HMO-POS Insured by Vantage Health Plan		
	State Share	Employee Share	Total Premium	State Share	Employee Share	Total Premium	State Share	Employee Share	Total Premium	State Share	Employee Share	Total Premium
<b>RETIREE WITH 1 MEDICARE</b>												
<b>ENROLLEE ONLY</b>	185.26	61.74	247.00	180.00	60.00	240.00	148.08	49.36	197.44	0.00	0.00	0.00
<b>RETIREE WITH 2 MEDICARE</b>												
<b>ENROLLEE + 1 (SPOUSE)</b>	370.50	123.50	494.00	360.00	120.00	480.00	296.16	98.72	394.88	0.00	0.00	0.00

Approved  
